

EXHIBIT

24



RECORDS DEPOSITION SERVICE
I N C O R P O R A T E D

P.O. BOX 5054, SOUTHFIELD, MI 48086-9877
T: (248) 357-3330 F: (248) 357-3337
WWW.RECDEP.COM

IN THE UNITED STATES DISTRICT COURT
EASTERN DISTRICT, SOUTHERN DIVISION

RDS ORDER#: 81646 - 2

SHIP TO: MICHAEL F. SCHMIDT (HARVEY, KRUSE, P.C.)

CASE NAME: NATIONWIDE VS KEENE ET AL VS LUPILOFF

CASE#: 11-CV-12422-AC-MKM

NAME ON RECORD: JENNIFER E. KEENE

A/K/A:

CLAIM#:

FILE#: 839576

DEPONENT: UNIVERSITY OF MICHIGAN MEDICAL CENTER

TREATED BY:

MEDIA: PAPER (1)

FOLLOWING ATTORNEY(S) RECEIVED A COPY OF THESE RECORDS:

MICHAEL F. SCHMIDT ESQ. (HARVEY, KRUSE, P.C.)

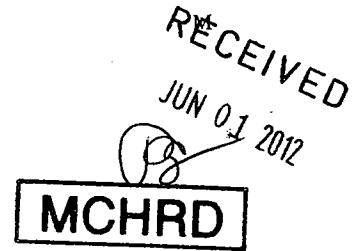
NOTE: RECORD PHOTOCOPIED/FORWARDED IN THE ORDER IN WHICH IT WAS RECEIVED FROM THE DEPONENT.

PART 1 OF 2



CONFIRMATION STATEMENT

JOB # 81646-2



TO: CUSTODIAN OF THE RECORDS
ATTN: HUMAN RESOURCES / PAYROLL
UNIVERSITY OF MICHIGAN MEDICAL CENTER

3003 S STATE STREET STE. G-250 / TOWER 1281
ANN ARBOR MI 48109

JUN 25 12PM 1:48

NAME ON RECORD: JENNIFER EVE KEENE
CASE NAME: SEE ATTACHED SUBPOENA FOR COMPLETE CASE CAPTION.
COURT NUMBER: 11-CV-12422-AC-MKM
DUE DATE: JUNE 8, 2012

JOB#: 81646-2 DUE DATE: 06-08-2012

RECORDS DEPOSITION SERVICE, INC.
27355 W. ELEVEN MILE ROAD
P.O. BOX 5054
SOUTHFIELD, MI 48086-9877



THE ATTACHED SUBPOENA IS FOR THE PURPOSE OF PHOTOCOPYING DOCUMENTS.
THIS SUBPOENA DOES NOT REQUIRE YOUR PERSONAL APPEARANCE. PLEASE CAREFULLY READ THE SUBPOENA FOR SPECIFIC DOCUMENTS REQUESTED AND SUBMIT THESE DOCUMENTS ON OR BEFORE THE DUE DATE.
IF YOU DO NOT POSSESS THE DOCUMENTS REQUESTED, PLEASE DRAFT A LETTER TO THAT EFFECT AND RETURN SAID LETTER WITH THIS CONFIRMATION STATEMENT TO THE ABOVE ADDRESS.



PLEASE PEEL AND AFFIX LABEL TO MAIL DOCUMENTS

PLEASE INCLUDE OUR JOB NUMBER AND DUE DATE WITH ALL CORRESPONDENCE.

Please
Sign and
Return with
Documents

CONFIRMATION OF DOCUMENT SUBMISSION 460

By affixing my signature, I hereby confirm that _____ pages, all requested documents in my possession on the above named person have been submitted. *

DATE

June 11, 2012
Paula Heula
CUSTODIAN OF THE RECORDS

*NOTE: If the following documents were requested by subpoena and are not in your possession, please check appropriate space below.

☐ No Records Available ☐ No Billings Available ☐ Best Copies Available
☐ No Photographs Available ☐ No X-Ray Films Available

Items to Follow:

☐ X-Rays ☐ Photos ☐ Other: _____
☐ Billings ☐ Corrected Copies _____

THIS CONFIRMATION STATEMENT MUST ACCOMPANY ALL DOCUMENTS SUBMITTED.

NOTE TO ATTORNEY: Records photocopied in the order in which received from the deponent.

02/18/2011 14:42

#336 P.002/003



To: Jennifer Keene
Empl ID: [REDACTED]

From: Laurie Hartman, ACNP, DP
Director of Advanced Practice Nursing

Carole McGillen, MS, RN
Administrative / Nurse Manager, CVC Clinic

Date: January 27, 2011

Subject: Last Chance Agreement
Team work / Systems Based Practice Work Performance

This memorandum represents a last chance agreement due to a pattern of unsatisfactory performance with regard to the teamwork and work performance in the endograft duties of your position. During the past year, you have received the following documentation regarding your unsatisfactory work performance:

- 9-10-10 – First Written Work Plan – Systems-Based Practice and Teamwork
 - Data packets with chronic delays
 - Sizing of Endografts – lack of timely turnaround
 - Delegating work not due to workload but perceived roles
- 12-14-10 – Second Written Work Plan – Systems-Based Practice and Teamwork
 - Delays in care (procedures) due to turnaround time with sizing of endografts
 - Concerns regarding understanding of clinical priorities for patients awaiting treatment
 - Inefficient use of resources (OR rooms) due to care delays
 - Follow-up with team members

You acknowledged these performance issues, primarily related to endograft duties. Given your proficient performance in the clinical care duties such as history and physicals, post-operative visits, return visits for Aortic follow-up, we are willing to provide you with one final opportunity to demonstrate that you can improve your performance by eliminating endograft sizing duties and demonstrate sustained ability to meet clinical expectations. You are still required to participate in the data collection for endograft patients.

02/18/2011 14:42 #336 P.003/003

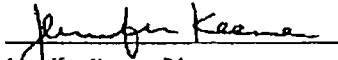
127648916

M

During the six months following the return from your leave, we need to see you demonstrate your ability to meet the clinical and teamwork expectations of your position. Clinical duties will increase in replacement of endograft time on your schedule. However, to facilitate patient care in a timely manner, you are required to cross cover for the clinical care coordinator for either anticipated and/or unanticipated absences. For all anticipated absences, we will adjust your clinical schedule accordingly to accommodate this incremental workload.

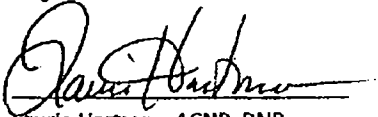
To assure that you have support needed to balance competing work / life issues, you are strongly encouraged to contact the Employee Assistance Program at [REDACTED] to request a confidential consult. With advance notice to your Supervisor, you may attend a meeting with the Employee Assistance Program during your paid work time.

This memorandum represents your last chance agreement. Please let us know how we can assist you during this review period.


Jennifer Keene, PA

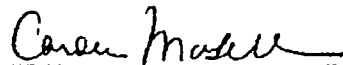
02 / 16 / 2011

Date


Laurie Hartman, ACNP, DNP
Director of Advanced Practice Nursing


2-18-11

Date


Carole McGillen, MS., RN
Administrative/Nurse Manager, CVC Clinic


2-16-2011

Date

<p>UMHS</p> <p>STRATEGIC PRINCIPLES</p> <p>Integration, Collaboration, Teamwork Innovation, Adaptation and Prioritization Growth and Investment 4. Taking Care of Our Own 5. Cultural Competency 6. High Value and Fiscal Soundness 7. Integrity and Trust</p>	 University of Michigan Health System	<p>UMHHC</p> <p>GOALS & OBJECTIVES</p> <ol style="list-style-type: none"> 1. Service 2. Financial Health 3. Quality Care 4. Academic Support 5. People 6. Community Health <p>Refer to website for goals and objectives information http://www.med.umich.edu/exec/umhsgoals/</p>
<p>Staff Performance Planning and Evaluation</p>		

<p align="center">UMHHC Performance Expectations For All Employees</p>		
<p>For behavioral descriptions of performance ratings go to: (form must be unlocked to use links)</p>		
<p>Performance Evaluation Rating Descriptions.pdf</p>		
<p>Scale: N=Not Met A=Approaching S=Solid Performance E=Exemplary</p>	<p>Self-Evaluation</p>	<p>Manager's Evaluation</p>
<p>1. Customer Focus: Relates work and job purpose to UMHHC mission and commitment to putting patients and families first.</p>	<p>E</p>	<p>E</p>
<p>2. Teamwork: Interacts effectively and builds respectful relationships within and between units and among individuals.</p>	<p>S</p>	<p>S</p>
<p>3. Communication: Communicates effectively in ways that enhance productivity and build respectful relationships. Demonstrates active listening, written, verbal, and information technology skills. Shares relevant information.</p>	<p>S</p>	<p>S</p>
<p>4. Conflict Resolution: Seeks constructive approaches to resolving workplace issues.</p>	<p>S</p>	<p>S</p>
<p>5. Integrity: Adheres to high standards of personal and professional conduct.</p>	<p>S</p>	<p>S</p>
<p>6. Adapting to Change: Responds positively to change, showing willingness to learn new ways to accomplish work.</p>	<p>S</p>	<p>S</p>
<p>7. Respect for Individuals: Fosters mutual respect and supports UMHS commitment to diversity. Promotes community building and diversity initiatives that help employees learn and respect each others' differences.</p>	<p>S</p>	<p>S</p>
<p>8. Safety: Contributes to a safe and secure environment for patients, visitors, faculty, and staff by following hand hygiene and other established procedures and protocols as appropriate by job function.</p>	<p>E</p>	<p>S</p>
<p>9. Quality: Adopts practices to improve work processes, enhance customer satisfaction and ensure excellence in daily work.</p>	<p>S</p>	<p>S</p>
<p>10. Efficiency: Accomplishes work in ways that maximize productivity and available resources while minimizing waste.</p>	<p>S</p>	<p>S</p>

PLEASE TYPE OR PRINT INFORMATION

Jennifer Keene	Cardiac Surgery		Physician Assistant	7/1/09 to 6/30/2010
Staff Member Name	Department Name	Employee ID #	Job Title/Classification	Evaluation Period

UMHS Performance Evaluation Redesign Committee 4/2006
Revised 1/29/09

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THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Staff Performance Planning and Evaluation

Summary of UMHC Performance Behaviors (Includes supporting comments and areas requiring further development. Use corresponding number where applicable.)

Jennifer,

This has been an especially dynamic year in cardiac surgery and the endograft program. When you first started, you did a lot to assist with our H&P coverage needs, which was a big help...however, this did hinder your orientation a bit. For the past 6 months, you've been getting more into the swing of things and learning the basics of endograft care in the post intervention setting.

Role responsibilities have still not been fully worked out but I have every confidence that we will work through these issues to become a more unified and efficient team. I would encourage you to continue to jump in whenever possible, clarify any issues as soon as they occur so that misunderstandings are avoided and to continue taking a proactive approach for your learning. It is helpful for all staff to continue to learn about how their own communication styles (verbal and body language) can enhance and detract from productive work teams so I would encourage you to seek feedback from others when possible and to be open to that feedback as you have been to date.

As far as being active with quality, safety and efficiency issues that impact our program and our patients, I believe that this will naturally come with time as you become more comfortable in the role and with your knowledge. You have an eye for quality and you want to do your best for patients and I know you will be a powerful force in this regard.

PLEASE TYPE OR PRINT INFORMATION				
Jennifer Keene	Cardiac Surgery		Physician Assistant	6/30/2010
Staff/Member Name	Department Name	Employee ID #	Job Title/Classification	Evaluation Period



THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Staff Performance Planning and Evaluation

UMHHC Performance Expectations Job Specific

Guidelines for writing job specific expectations go to (form must be unlocked to used links)

UM Health System - Human Resources: Writing Job Specific Expectations

List Key Job Specific Expectations based on the job description

To add rows, copy and paste an entire row. Document must be "unlocked" to add rows. See guide website for details.

Scale: N = Not Met A = Approaching S = Solid Performance E = Exemplary	Self Evaluation	Manager's Evaluation
11. Attendance.	E	E
12.		
13.		
14.		
15.		
16.		

Summary of Job Specific Behaviors (Includes supporting comments and areas requiring further development) Use corresponding number where applicable

Jennifer,

One of your greatest assets is your ability to connect with patients. They really appreciate the time that you take with them and they feel confident in your abilities. Your knowledge of aortic disease has really grown a lot these past few months and will continue to develop as you have more exposure to patient situations.

Your documentation is thorough and timely. You respond to email and pages in an appropriate timeframe. When staff need to change their schedule a bit or move patients around, you try to be flexible and help them out when you can. Your peers really appreciate this a great deal. During times of high stress situations, you remain calm and organized.

Previous year Learning and Self-Development Plan Assessment. Refer to the M-Learning system transcript for specific courses and activities completed. <http://mlearning.med.umich.edu/> List supporting comments and areas requiring further development below.

See M-Learning

Competency/Mandatory Requirement Summary - See M-Learning link <http://mlearning.med.umich.edu/> to obtain transcript. Required mandates include: Fire/Safety, Corporate Compliance, Unit Critical Incident Plan, Patient Safety. Refer to blue folder competency tab for competencies not included in M-Learning.

PLEASE TYPE OR PRINT INFORMATION

Jennifer Keene	Cardiac Surgery	1000000000	Physician Assistant	10/30/2010
Staff Member Name	Department Name	Employee ID #	Job Title/Classification	Evaluation Period

THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Staff Performance Planning and Evaluation

Overall Evaluation Summary Statement

Guidelines for the overall performance ratings go to: (form must be unlocked to use links)

Overall Rating Guidelines.pdf

Jennifer,

You have begun to transition into the details of this endograft role and are starting to carve out your own little niche that will improve the care provided to endograft patients by our service. You are always asking thoughtful questions about why things are done and what can be done better. This is GREAT and we hope that you will continue to do so. This coming year, you'll have some good opportunities to delve into some broader activities programmatically and I would love to see you begin teaching some of our inpatient staff about endograft treatment and care.

Overall Performance Rating

Scale: N = Not Met A = Approaching S = Solid Performance E = Exemplary

N	A	S	E
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

If "N" or "A" used in the overall rating, check problem area(s) listed below. Identify any action plans for UMHC performance expectations, job specific, or self-development areas not listed above.

☐ Job Specific ☐ Customer Service ☐ Communication ☐ Effective team/group work ☐ Other

Action Plan:

Peer /Customer Feedback (Optional): Use this space to capture feedback that is received throughout the year.

Sources of peer/customer feedback include:

- Employee survey results
- Customer feedback solicited via questionnaire
- Patient satisfaction survey results
- You're Super Awards
- 360 Feedback results
- Written feedback (i.e. emails) regarding the individual's performance

Feedback Summary: See Peer Feedback forms

Annual Learning and Self-Development Plan: The Learning and Self-Development Plan is used to set personal and professional goals which contribute to the staff member's growth and development. After review of evaluation and peer/customer feedback, identify plan for development. (Examples of developmental opportunities include job shadowing, coaching, mentoring and training). Enter all training courses into the M-Learning system. <http://mlearning.med.umich.edu/>



- Growth Area: Endograft – training with Mary Passow, observation of OR cases, ☒ training with Dr. Quint
- Growth Area: Patient Education – develop materials to assist with teaming
- Growth Area:

Employee Comments (Optional)

Date	Employee Signature	Supervisor Name	Supervisor Signature	Department
6/30/2010		Laurie Hartman		Cardiac Surgery

PLEASE TYPE OR PRINT INFORMATION

Jennifer Keene	Cardiac Surgery		Physician Assistant	6/30/2010
Staff Member Name	Department Name	Employee ID #	Job Title/Classification	Evaluation Period

	University of Michigan Health System		UMHHC Goals
	Physician Assistant Performance Planning and Evaluation		1. Improve clinical outcomes and service. 2. Support the University's health and science academic mission. 3. Improve customer satisfaction in all groups. 4. Create a safe and healthful workplace 5. Enhance our financial strength and competitiveness 6. Participate with state and local partners to create healthy communities

Scale: N = Not Met; A = Approaching; P = Proficient; S = Surpassing		
UMHS Performance Expectations (For all employees)	Self Evaluation	Manager's Evaluation
1. Consistently demonstrates effective communication skills using: active listening, written, verbal and information technology skills Comments: Improvement Plan:	P	A → P
2. Protects confidential information Comments: Improvement Plan:	S	P
3. Complies with safety instructions, observes safe work practices, and provides input on safety issues and promotes a safe work environment Comments: Improvement Plan:	S	P
4. Consistently demonstrates the organization's values: Patients and families first, Accountability for outcomes, Respect for individuals, Teamwork, Never-ending improvement, Empowerment, Responsibility for cost-effectiveness, and Service to the community (PARTNERS) Comments: Improvement Plan:	P	N → A ⁺
5. Consistently meets the organization's expectations for exemplary customer service Comments: Improvement Plan:	S	A
6. Adopts practices to improve work processes, enhance customer satisfaction and reduce wastes and costs Comments: Improvement Plan:	P	P
7. Works effectively with team/work group and others to accomplish organizational goals Comments: Improvement Plan:	P	N → P
8. Articulates role and participates in the Plan-Do-Check-Act (PDCA) cycle for continuous quality improvement Comments: Improvement Plan:	N/A	P

* Arrow show direction of improvement from fall 2005 to 5/2006

Scale: N = Not Met; A = Approaching; P = Proficient; S = Surpassing				
PLEASE TYPE OR PRINT INFORMATION				
Jennifer Keene	Ham/Onc	[REDACTED]	Phys Asst	2005-2006
Staff Member Name	Department Name	Employee ID #	Job Title / Classification	Evaluation Period

THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Staff Performance Planning and Evaluation

UMHS Performance Expectations (For all employees)	Self Evaluation	Manager's Evaluation
9. Demonstrates behaviors which support our organization's commitment to diversity, contributing toward an inclusive and respectful work environment for all	P	N → P
Comments:		
Improvement Plan:		
10. Demonstrates knowledge of the organization's policies and procedures (including the Speak Up With Safety Concerns policy) to ensure the timely reporting of patient safety events and/or situations	S	S
Comments:		
Improvement Plan:		
11. Attendance: (Job Specific)	N	B P
Comments: for much of the year I was on work restriction or ill		
Improvement Plan:		
12. Actively participates in ongoing projects related to clinical research protocols or critical pathways.	N/A	P
Comments: Dr. Beckenstedt doesn't participate in clinical research		
Improvement Plan:		
13. Performs physical examinations and interprets clinical symptoms, lab tests, and diagnostic imaging.	P	See attached letter
Comments: I was restricted due to pain and dysfunction from thoracic outlet plas		
Improvement Plan:		
14. Provides support of patients undergoing chemotherapy	S	P-
Comments:		
Improvement Plan:		
15. Actively participates in the education of nurses and other support personnel about issues related to protocols or critical pathways, when asked.	P	P
Comments: I have not been asked to do so but would be happy to do so		
Improvement Plan:		
16. Initiates diagnostic tests as needed	S	S-
Comments:		
Improvement Plan:		
17. Performs invasive and non-invasive diagnostic/ therapeutic procedures.	S	S S
Comments:		
Improvement Plan:		
18. Prepares initial orders for chemotherapy, supportive care, and drug usage within the restrictions of the law.	S	P *
Comments: See Attached		
Improvement Plan:		

Competency / Mandatory Requirement Summary

Check institutional regulatory requirements met:

☐ Fire/Safety ☐ Corporate Compliance ☐ Unit Critical Incident Plan ☐ Patient Safety

List unit based competencies and unit/department mandatory requirements in boxes below. Check yes for met; no for not met.

PLEASE TYPE OR PRINT INFORMATION

Jennifer Keene	Hem/bnc	[REDACTED]	Physician Asst	2005-2006
Staff Member Name	Department Name	Employee ID #	Job Title / Classification	Evaluation Period

UMHS Performance Planning and Evaluation Committee (origination 6/2001): Updated 03/03/2005 for 2004-2005

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THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Staff Performance Planning and Evaluation

Competency / Mandatory Met:	Y	N	Competency / Mandatory Met:	Y	N	Competency / Mandatory Met:	Y	N
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

Action plan for competency(s) / mandatory(s) not met:

Y N Staff member has demonstrated competent care/service based on the ages of the patients / customers served (supporting documentation must be in the evaluation or placed in the employee blue folder).
☐ ☐ Place an "X" in the boxes below for appropriate age groups served.

☐ Neonates ☐ Infants ☐ Pediatrics ☐ Adolescents ☐ Adults ☐ Geriatrics ☐ Other:

Overall Evaluation Summary

please see attached document

Overall Performance Rating: N A P S

Scale: N = Not Met; A = Approaching; P = Proficient; S = Surpassing

If "N" or "A" used, check problem area(s) listed below. Then check associated action plan(s) below problem area.

Job Specific	Customer Service	Communication	Effective team / group work	Other:
<input type="checkbox"/> Education	<input type="checkbox"/> Education	<input type="checkbox"/> Education	<input type="checkbox"/> Education	<input type="checkbox"/> Education
<input type="checkbox"/> Mentoring	<input type="checkbox"/> Mentoring	<input type="checkbox"/> Mentoring	<input type="checkbox"/> Mentoring	<input type="checkbox"/> Mentoring
<input type="checkbox"/> Observation	<input type="checkbox"/> Observation	<input type="checkbox"/> Observation	<input type="checkbox"/> Observation	<input type="checkbox"/> Observation
<input type="checkbox"/> Practice	<input type="checkbox"/> Practice	<input type="checkbox"/> Practice	<input type="checkbox"/> Practice	<input type="checkbox"/> Practice
<input type="checkbox"/> Other:	<input type="checkbox"/> Other:	<input type="checkbox"/> Other:	<input type="checkbox"/> Other:	<input type="checkbox"/> Other:

Annual Learning and Self-Development Plan: The Learning and Self-Development Plan is used to set personal and professional goals which contribute to the staff member's growth and development and are not stated in the improvement plans listed on previous pages. Time frames should be stated with all staff development goals.

1. Growth Area:	Time Frame
• Outcome:	
• Action:	
• Evaluation:	
• Comments:	
2. Growth Area:	Time Frame
• Outcome:	
• Action:	
• Evaluation:	
• Comments:	
3. Growth Area:	Time Frame
• Outcome:	
• Action:	
• Evaluation:	
• Comments:	

Employee Comments: (Optional)

07/31/06 Jennifer Keene Beckenbrot Paul A. [Signature] Int'l Unit
 Date Employee Signature Supervisor's Name Supervisor's Signature Department

PLEASE TYPE OR PRINT INFORMATION

Jennifer Keene	Hem/Onc	[Redacted]	Physician Asst.	2005-2006
Staff Member Name	Department Name	Employee ID #	Job Title / Classification	Evaluation Period



SEPTEMBER 5, 2000

JENNIFER E BAKER
CANCER CTR
7-216 CCGC

0948

THIS IS NOTIFICATION OF A CHANGE IN THE TERMS AND CONDITIONS OF YOUR APPOINTMENT AT THE UNIVERSITY OF MICHIGAN. THIS NOTICE REFLECTS A MERIT SALARY INCREASE.

AT THIS TIME YOUR TITLE IS PHYSICIAN ASSISTANT, UMH CANCER CENTER.

THE FOLLOWING IS INFORMATION REGARDING YOUR APPOINTMENT(S):

TITLE PHYSICIAN ASSISTANT

UMH CANCER CENTER

APP [REDACTED]

ACCOUNT	EFFORT	BEGIN	END	AMOUNT	FUNDING DEPARTMENT
[REDACTED]	55.0%	07-01-00	08-31-00	[REDACTED] MO	UMH CANCER CENTER
[REDACTED]	25.0%	07-01-00	08-31-00	[REDACTED] MO	UMH CANCER CENTER
[REDACTED]	20.0%	07-01-00	08-31-00	[REDACTED] MO	UMH CANCER CENTER
[REDACTED]	55.0%	09-01-00	OPEN	[REDACTED] MO	UMH CANCER CENTER
[REDACTED]	25.0%	09-01-00	OPEN	[REDACTED] MO	UMH CANCER CENTER
[REDACTED]	20.0%	09-01-00	OPEN	[REDACTED] MO	UMH CANCER CENTER

SALARY PAYMENTS ON ACCOUNTS WITH OPEN END DATES WILL CONTINUE WITHOUT ADDITIONAL NOTIFICATION.

TWELVE-MONTH SALARIES ARE PAID ONE TWELFTH EACH MONTH, NORMALLY ON THE LAST WORK DAY OF THE MONTH.

FOR STAFF BENEFITS QUESTIONS RESULTING FROM THIS APPOINTMENT CHANGE, PLEASE CALL THE BENEFITS OFFICE.

THE FOLLOWING INFORMATION IS ON FILE WITH THE HUMAN RESOURCE RECORDS AND INFORMATION SERVICES/MEDICAL CAMPUS HUMAN RESOURCES DEPARTMENT:

CURRENT HOME ADDRESS:

ADMIN DEPT: UMH CANCER CENTER

SSN: [REDACTED]

SERVICE DATE: 09-11-95

BENEFIT DATE: 09-11-95

BIRTH DATE: [REDACTED]

CITIZENSHIP: US

MAJOR DEGREES: B.A.

HOME TELEPHONE: [REDACTED]

CAMPUS PHONE: [REDACTED]

PLEASE RETAIN FOR YOUR RECORDS

00079



JENNIFER E BAKER
PAGE 2

PLEASE CONTACT YOUR ADMINISTRATIVE DEPARTMENT TO MAKE NECESSARY
CORRECTIONS IF ANY OF THIS INFORMATION IS INACCURATE.

LEE C. BOLLINGER
PRESIDENT

CC: 3210 UMH CANCER CENTER PATRICIA A ANDERSON B1-1527 CCGC 0910

PLEASE RETAIN FOR YOUR RECORDS

00080

365-74-0030

The University of Michigan

AUGUST 16, 1999

JENNIFER E BAKER
 CANCER CTR
 7-216 CCGC

0948

THIS IS NOTIFICATION OF A CHANGE IN THE TERMS AND CONDITIONS OF YOUR APPOINTMENT AT THE UNIVERSITY OF MICHIGAN. THIS NOTICE REFLECTS A MERIT SALARY INCREASE AND A MARKET ADJUSTMENT IN SALARY.

AT THIS TIME YOUR TITLE IS PHYSICIAN ASSISTANT, UMH CANCER CENTER.

THE FOLLOWING IS INFORMATION REGARDING YOUR APPOINTMENT(S):

TITLE PHYSICIAN ASSISTANT

UMH CANCER CENTER

[REDACTED]

ACCOUNT	EFFORT	BEGIN	END	AMOUNT	FUNDING	DEPARTMENT
[REDACTED]	10.0%	07-01-99	08-31-99	[REDACTED]	MO	UMH CANCER CENTER
[REDACTED]	90.0%	07-01-99	08-31-99	[REDACTED]	MO	UMH CANCER CENTER
[REDACTED]	10.0%	09-01-99	OPEN	[REDACTED]	MO	UMH CANCER CENTER
[REDACTED]	90.0%	09-01-99	OPEN	[REDACTED]	MO	UMH CANCER CENTER

SALARY PAYMENTS ON ACCOUNTS WITH OPEN END DATES WILL CONTINUE WITHOUT ADDITIONAL NOTIFICATION.

TWELVE-MONTH SALARIES ARE PAID ONE TWELFTH EACH MONTH, NORMALLY ON THE LAST WORK DAY OF THE MONTH.

FOR STAFF BENEFITS QUESTIONS RESULTING FROM THIS APPOINTMENT CHANGE, PLEASE CALL THE BENEFITS OFFICE.

THE FOLLOWING INFORMATION IS ON FILE WITH THE HUMAN RESOURCE RECORDS AND INFORMATION SERVICES/MEDICAL CAMPUS HUMAN RESOURCES DEPARTMENT:

CURRENT HOME ADDRESS:

[REDACTED]

ADMIN DEPT: UMH CANCER CENTER

SSN: [REDACTED]

SERVICE DATE: 09-11-95

BENEFIT DATE: 09-11-95

BIRTH DATE: [REDACTED]

HOME TELEPHONE: [REDACTED]

CITIZENSHIP: US

CAMPUS PHONE: [REDACTED]

MAJOR DEGREES: B.A.

PLEASE CONTACT YOUR ADMINISTRATIVE DEPARTMENT TO MAKE NECESSARY CORRECTIONS IF ANY OF THIS INFORMATION IS INACCURATE.

LEE C. BOLLINGER
 PRESIDENT

CC: 3210 UMH CANCER CENTER PATRICIA A ANDERSON B1-1527 CCGC 0910

PLEASE RETAIN FOR YOUR RECORDS

365-74-0030

The University of Michigan

AUGUST 22, 1998

JENNIFER E BAKER
 AMBULATORY CARE SVCS
 B1-207 CCGC

0150

THIS IS NOTIFICATION OF A CHANGE IN THE TERMS AND CONDITIONS OF YOUR APPOINTMENT AT THE UNIVERSITY OF MICHIGAN. THIS NOTICE REFLECTS A MERIT SALARY INCREASE.

AT THIS TIME YOUR TITLE IS PHYSICIAN ASSISTANT, UMH AMBULATORY CARE SERVICES.

THE FOLLOWING IS INFORMATION REGARDING YOUR APPOINTMENT(S):

TITLE	PHYSICIAN ASSISTANT	UMH AMB CARE SVCS				
[REDACTED]						
ACCOUNT	EFFORT	BEGIN	END	AMOUNT	FUNDING	DEPARTMENT
[REDACTED]	100.0%	09-01-98	OPEN	[REDACTED]	MO	UMH AMB CARE SVCS

SALARY PAYMENTS ON ACCOUNTS WITH OPEN END DATES WILL CONTINUE WITHOUT ADDITIONAL NOTIFICATION.

TWELVE-MONTH SALARIES ARE PAID ONE TWELFTH EACH MONTH, NORMALLY ON THE LAST WORK DAY OF THE MONTH.

FOR STAFF BENEFITS QUESTIONS RESULTING FROM THIS APPOINTMENT CHANGE, PLEASE CALL THE BENEFITS OFFICE.

THE FOLLOWING INFORMATION IS ON FILE WITH THE HUMAN RESOURCE RECORDS AND INFORMATION SERVICES/MEDICAL CAMPUS HUMAN RESOURCES DEPARTMENT:

CURRENT HOME ADDRESS:

[REDACTED]

ADMIN DEPT: UMH AMB CARE SVCS

SSN: [REDACTED]

SERVICE DATE: 09-11-95

BENEFIT DATE: 09-11-95

BIRTH DATE: [REDACTED]

HOME TELEPHONE: [REDACTED]

CITIZENSHIP: US

CAMPUS PHONE: [REDACTED]

MAJOR DEGREES: B.A.

PLEASE CONTACT YOUR ADMINISTRATIVE DEPARTMENT TO MAKE NECESSARY CORRECTIONS IF ANY OF THIS INFORMATION IS INACCURATE.

LEE C. BOLLINGER
 PRESIDENT

CC: 3243 UMH AMB CARE SVCS CATHRYN S MCCREADY NI4A06 0474

PLEASE RETAIN FOR YOUR RECORDS

365-74-0030

The University of Michigan

SEPTEMBER 17, 1997

JENNIFER E BAKER
BONE MARROW PROGRAM
B1-358 CCGC

0910

THIS IS NOTIFICATION OF A CHANGE IN THE TERMS AND CONDITIONS OF YOUR APPOINTMENT AT THE UNIVERSITY OF MICHIGAN. THIS NOTICE REFLECTS A MERIT SALARY INCREASE.

AT THIS TIME YOUR TITLE IS PHYSICIAN'S ASSISTANT, UMH BONE MARROW PROGRAM.

THE FOLLOWING IS INFORMATION REGARDING YOUR APPOINTMENT(S):

TITLE	PHYSICIAN ASSISTANT	UMH BONE MARROW PRGM
APPT RATE	[REDACTED]	PN: 017
ACCOUNT EFFORT	BEGIN	END
[REDACTED]	100.0%	07-01-97 08-31-97
[REDACTED]	100.0%	09-01-97 OPEN
FUNDING DEPARTMENT	UMH BONE MARROW PRGM	
FUNDING DEPARTMENT	UMH BONE MARROW PRGM	

SALARY PAYMENTS ON ACCOUNTS WITH OPEN END DATES WILL CONTINUE WITHOUT ADDITIONAL NOTIFICATION.

TWELVE-MONTH SALARIES ARE PAID ONE TWELFTH EACH MONTH, NORMALLY ON THE LAST WORK DAY OF THE MONTH.

FOR STAFF BENEFITS QUESTIONS RESULTING FROM THIS APPOINTMENT CHANGE, PLEASE CALL THE BENEFITS OFFICE.

THE FOLLOWING INFORMATION IS ON FILE WITH THE HUMAN RESOURCES RECORDS AND INFORMATION SERVICES/MEDICAL CAMPUS HUMAN RESOURCES DEPARTMENT:

CURRENT HOME ADDRESS:	ADMIN DEPT: UMH BONE MARROW PRGM
[REDACTED]	SSN: [REDACTED]
	SERVICE DATE: 09-11-95
	BENEFIT DATE: 09-11-95
	BIRTH DATE: [REDACTED]
HOME TELEPHONE: [REDACTED]	CITIZENSHIP: US
CAMPUS PHONE: [REDACTED]	MAJOR DEGREES: B.A.

PLEASE CONTACT YOUR ADMINISTRATIVE DEPARTMENT TO MAKE NECESSARY CORRECTIONS IF ANY OF THIS INFORMATION IS INACCURATE.

LEE C. BOLLINGER
PRESIDENT

CC: 3241 UMH BONE MARROW PRGM BEV L NUGENT E2015 UMH 0247

PLEASE RETAIN FOR YOUR RECORDS

00106



University of Michigan
Health System



Physician Assistant Performance Planning and Evaluation

UMHHC Goals

1. Improve clinical outcomes and service.
2. Support the University's health and science academic mission.
3. Improve customer satisfaction in all groups.
4. Create a safe and healthful workplace
5. Enhance our financial strength and competitiveness
6. Participate with state and local partners to create healthy communities


Scale: N = Not Met; A = Approaching; P = Proficient; S = Surpassing		
UMHS Performance Expectations (For all employees)	Self-Evaluation	Manager's Evaluation
1. Consistently demonstrates effective communication skills using: active listening, written, verbal and information technology skills	S	S
Comments:		
Improvement Plan:		
2. Protects confidential information	S	S
Comments:		
Improvement Plan:		
3. Complies with safety instructions, observes safe work practices, and provides input on safety issues and promotes a safe work environment	S	S
Comments:		
Improvement Plan:		
4. Consistently demonstrates the organization's values: Patients and families first, Accountability for outcomes, Respect for individuals, Teamwork, Never-ending improvement, Empowerment, Responsibility for cost-effectiveness, and Service to the community (PARTNERS)	S	S
Comments:		
Improvement Plan:		
5. Consistently meets the organization's expectations for exemplary customer service	S	S
Comments:		
Improvement Plan:		
6. Adopts practices to improve work processes, enhance customer satisfaction and reduce wastes and costs	S	S
Comments:		
Improvement Plan:		
7. Works effectively with team/work group and others to accomplish organizational goals	S	S
Comments:		
Improvement Plan:		
8. Articulates role and participates in the Plan-Do-Check-Act (PDCA) cycle for continuous quality improvement	S	S
Comments:		
Improvement Plan:		

PLEASE TYPE OR PRINT INFORMATION				
Jennifer Baker	Int Med – Hem/Onc	[REDACTED]	Physician Assistant	July 1, 2003 – June 30, 2004
Staff Member Name	Department Name	Employee ID #	Job Title / Classification	Evaluation Period

THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Physician Assistant Performance Planning and Evaluation

Scale: NI = Not Met; A = Approaching; P = Proficient; S = Surpassing		
Job Specific Expectations (Must be tied to job description)	Self Evaluation	Manager's Evaluation
9. Attendance: (Job Specific)	S	S
Comments:		
Improvement Plan:		
10. Actively participates in ongoing projects related to clinical research protocols or critical pathways	S	S
Comments:		
Improvement Plan:		
11. Performs and interprets physical examinations	S	S
Comments:		
Improvement Plan:		
12. Provides patient care prior to, during, and following chemotherapy	S	S
Comments:		
Improvement Plan:		
13. Actively participates in the education of nurses and other support personnel about issues related to protocols or critical pathways when asked.	S	S
Comments:		
Improvement Plan:		
14. Initiates (as per protocol or critical pathway) various laboratory or radiological studies.	S	S
Comments:		
Improvement Plan:		
15. Performs invasive and non-invasive diagnostic and therapeutic procedures	S	S
Comments:		
Improvement Plan:		
16. Prepares initial orders for chemotherapy, supportive care drug usage, non-narcotic medications per protocol or critical pathway within the restrictions of the law	S	S
Comments:		
Improvement Plan:		
17.		
Comments:		
Improvement Plan:		
18.		
Comments:		
Improvement Plan:		

PLEASE TYPE OR PRINT INFORMATION

Jennifer Baker	Int Med – Hem/Onc		Physician Assistant	July 1, 2003 – June 30, 2004
Staff Member Name	Department Name	Employee ID #	Job Title / Classification	Evaluation Period

THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Physician Assistant Performance Planning and Evaluation

Peer / Staff / Customer Feedback

Competency / Mandatory Requirement Summary

Check institutional regulatory requirements met:

☒ Fire/Safety ☒ Corporate Compliance ☒ Unit Critical Incident Plan ☒ Patient Safety ☒ HIPAA

List unit based competencies and unit/department mandatory requirements in boxes below. Check yes for met; no for not met.

Competency / Mandatory Met:	Y	N	Competency / Mandatory Met:	Y	N	Competency / Mandatory Met:	Y	N
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

Action plan for competency(s) / mandatory(s) not met:

☒ ☐ Staff member has demonstrated competent care/service based on the ages of the patients / customers served (supporting documentation must be in the evaluation or placed in the employee blue folder).

Place an "X" in the boxes below for appropriate age groups served.

☐ Neonates ☐ Infants ☐ Pediatrics ☐ Adolescents ☒ Adults ☐ Geriatrics ☐ Other:

Overall Evaluation Summary

Jennifer continues to perform at an outstanding level. She has superior skills and knowledge base which spans elements of bone marrow transplant, general hematology & coagulation disorders. She functions reliably well at a very high level of independence. Patients enjoy her care and actively seek to see her in clinic.

Overall Performance Rating:

N A P S

Scale: N = Not Met; A = Approaching; P = Proficient; S = Surpassing

☐ ☐ ☐ ☒

If "N" or "A" used, check problem area(s) listed below. Then check associated action plan(s) below problem area:

Job Specific	Customer Service	Communication	Effective team / group work	Other
<input type="checkbox"/> Education	<input type="checkbox"/> Education	<input type="checkbox"/> Education	<input type="checkbox"/> Education	<input type="checkbox"/> Education
<input type="checkbox"/> Mentoring	<input type="checkbox"/> Mentoring	<input type="checkbox"/> Mentoring	<input type="checkbox"/> Mentoring	<input type="checkbox"/> Mentoring
<input type="checkbox"/> Observation	<input type="checkbox"/> Observation	<input type="checkbox"/> Observation	<input type="checkbox"/> Observation	<input type="checkbox"/> Observation
<input type="checkbox"/> Practice	<input type="checkbox"/> Practice	<input type="checkbox"/> Practice	<input type="checkbox"/> Practice	<input type="checkbox"/> Practice
<input type="checkbox"/> Other:	<input type="checkbox"/> Other:	<input type="checkbox"/> Other:	<input type="checkbox"/> Other:	<input type="checkbox"/> Other:

Annual Learning and Self-Development Plan: The Learning and Self-Development Plan is used to set personal and professional goals which contribute to the staff member's growth and development and are not stated in the improvement plans listed on previous pages. Time frames should be stated with all staff development goals.

1. Growth Area:	Develop knowledge base to assist in writing plans for	Time Frame:
• Outcome:	anticoagulant bridging for procedures	1 year
• Action:	Attendance at conferences re: anticoagulants	
• Evaluation:	Review of prep anticoagulant bridging plans w/ supervisor	
• Comments:		
2. Growth Area:		Time Frame
• Outcome:		
• Action:		
• Evaluation:		
• Comments:		

Employee Comments: (Optional)

Date	Employee Signature	Supervisor's Name	Supervisor's Signature	Department
8/5/04	Jennifer Baker	Mark Backenstett	Paula Badewier	Hematology

PLEASE TYPE OR PRINT INFORMATION

Jennifer Baker	Int Med - Hem/Onc		Physician Assistant	July 1, 2003 - June 30, 2004
Staff Member Name	Department Name	Employee ID #	Job Title / Classification	Evaluation Period

THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Physician Assistant Performance Planning and Evaluation

University of Michigan Health System
Confidentiality and Security Statement
Workforce, Vendor, Visiting Observer and Scholar

The University of Michigan Health System is committed to protecting the confidentiality and security of information. I may be an employee, faculty, student, trainee, visiting observer, visiting health professional or scholar, volunteer, or vendor at UMHS. During the course of my duties or purpose at the Health System, I may have access to proprietary or confidential information. I understand that all proprietary and protected health information (collectively PHI) must be maintained confidentially, and in a secure fashion.

I agree to follow all UMHS policies and procedures governing the confidentiality and security of PHI in any form, including oral, fax, photographic, written, or electronic. I will regard both confidentiality and security as a duty and responsibility while part of the Health System workforce, or during my involvement with UMHS as a non-workforce member. I have completed UMHS HIPAA training.

I agree that I will not access, release, or share PHI, except as necessary to complete my duties or purpose at the UMHS. I understand that I may not access any information on friends or family members unless a Release of Information form authorizes me to do so, unless doing so is a necessary part of my job duties, or unless I am otherwise permitted to do so by UMHS policies. I understand that I am not authorized to use or release PHI to anyone who is not part of the UMHS workforce or an approved visiting observer, health professional, or scholar except as provided in UMHS policies and procedures, by University of Michigan contract, or as required by law.

I agree that I will use all reasonable means to protect the security of PHI in my control, and to prevent it from being accessed or released, except as permitted by law. I will use only the access privileges I have been authorized to use, and will not reveal any of my passwords or share access with others. I will take precautions to avoid inadvertently revealing PHI; for example, I will use workstations in a safe manner and will make reasonable efforts to prevent conversations from being overheard, including speaking in lowered tones and not discussing PHI in public areas. If I keep patient notes on a handheld or laptop computer or other electronic device, I will ensure that my supervisor knows of and has approved such use and I will keep this information secure and confidential. If, as part of my responsibility, I must take PHI off the premises, I will do so only with permission from my supervisor; I will protect PHI from disclosure; and will ensure that the PHI is either returned to UMHS or destroyed.

I agree that when my employment, affiliation, visitation or assignment with UMHS ends, I will not take any PHI with me and I will not reveal any PHI that I had access to as a result of my duties at the UMHS. I will either return PHI to UMHS or destroy it in a manner that renders it unreadable and unusable by anyone else.

I agree to immediately report unauthorized use or disclosure of PHI (including theft), or security issues affecting systems that contain or give access to PHI, to my supervisor, or to the UMHS Compliance and Privacy Office, 7300 Medical Science I, Box 0625, (734) 615-4759, (888) 296-2481.

I understand that if I do not keep PHI confidential, or if I allow or participate in inappropriate disclosure or access to PHI, I will be subject to immediate disciplinary or corrective action, up to and including dismissal or loss of access privileges to UMHS property and facilities. I understand that unauthorized access, use, or disclosure of PHI may also violate federal and state law, and may result in criminal and civil penalties against the University and/or me personally.

Signature

Jennifer Baker

Printed Name

Jennifer Baker

Date

8/5/04

Employee ID Number (if applicable)

[REDACTED]

Revision date: April 19th, 2004

PA Perf Eval J Baker.

Page 1

due July 14

M.

Scale: N = Not Met; A = Approaching; P = Proficient; S = Surpassing		
UMHS Performance Expectations (For all employees)	Self Evaluation	Manager's Evaluation
1. Consistently demonstrates effective communication skills using: active listening, written, verbal and information technology skills		S
Comments:		
Improvement Plan:		
2. Protects confidential information		S
Comments:		
Improvement Plan:		
3. Complies with safety instructions, observes safe work practices, and provides input on safety issues and promotes a safe work environment		S
Comments:		
Improvement Plan:		
4. Consistently demonstrates the organization's values: Patients and families first, Accountability for outcomes, Respect for individuals, Teamwork, Never-ending improvement, Empowerment, Responsibility for cost-effectiveness, and Service to the community (PARTNERS)		S
5. Comments:		
Improvement Plan:		
6. Consistently meets the organization's expectations for exemplary customer service		S
Comments:		
Improvement Plan:		
7. Adopts practices to improve work processes, enhance customer satisfaction and reduce wastes and costs		S
Comments:		
Improvement Plan:		
8. Works effectively with team/work group and others to accomplish organizational goals		S
Comments:		
Improvement Plan:		
9. Articulates role and participates in the Plan-Do-Check-Act (PDCA) cycle for continuous quality improvement		S
Comments:		
Improvement Plan:		

PLEASE TYPE OR PRINT INFORMATION				
Jennifer Baker	Int Med - Hem/Onc	[REDACTED]	Physician Assistant	2002-2003
Staff Member Name	Department Name	Employee ID #	Job Title / Classification	Evaluation Period

UMHS Performance Planning and Evaluation Committee 6/2001; Updated 5/2003

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THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Staff Performance Planning and Evaluation

Scale: N = Not Met; A = Approaching; P = Proficient; S = Surpassing		
Job Specific Expectations (Must be tied to job description)	Self Evaluation	Manager's Evaluation
10. Attendance: (Job Specific)		S
Comments:		
Improvement Plan:		
11. Actively participates in ongoing projects related to clinical research protocols or critical pathways		S
Comments:		
Improvement Plan:		
12. Performs and interprets physical examinations		S
Comments:		
Improvement Plan:		
13. Provides patient care prior to, during, and following chemotherapy		S
Comments:		
Improvement Plan:		
14. Actively participates in the education of nurses and other support personnel about issues related to protocols or critical pathways when asked.		S
Comments:		
Improvement Plan:		
15. Initiates (as per protocol or critical pathway) various laboratory or radiological studies.		S
Comments:		
Improvement Plan:		
16. Performs invasive and non-invasive diagnostic and therapeutic procedures		S
Comments:		
Improvement Plan:		
17. Prepares initial orders for chemotherapy, supportive care drug usage, non-narcotic medications per protocol or critical pathway within the restrictions of the law		S
Comments:		
Improvement Plan:		
18. Assists physicians in the recruiting of new patients for transplant programs in breast cancer, lymphoma, leukemia, and multiple myeloma		S
Comments:		
Improvement Plan:		
19. Assists in treating patients prior to transplant and provides care post-transplant		S
Comments:		
Improvement Plan:		
20. Learning to routinely assess patient performance status and recording it.		SP
Comments: <i>We do not generally use a scale in our long patients</i>		
Improvement Plan:		

PLEASE TYPE OR PRINT INFORMATION

Jennifer Baker	Int Med - Hem/Onc	[REDACTED]	Physician Assistant	2002-2003
Staff Member Name	Department Name	Employee ID#	Job Title / Classification	Evaluation Period

THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM

University of Michigan Hospitals and Health Centers

Staff Performance Planning and Evaluation

Peer/Staff Customer Feedback

Imogene is outstanding. I have been a level of competency that often exceeds the 1st & 2nd year fellows in the dx, care & management of hematology patients.

Competency / Mandatory Requirement Summary

Check institutional regulatory requirements met:

Fire/Safety ☒ Corporate Compliance ☒ Unit Critical Incident Plan ☒ Patient Safety ☒ HIPAA ☒

List unit based competencies and unit/department mandatory requirements in boxes below. Check yes for met; no for not met.

Competency / Mandatory Met:	Y	N	Competency / Mandatory Met:	Y	N	Competency / Mandatory Met:	Y	N

Action plan for competency(s) / mandatory(s) not met:

Y N: Staff member has demonstrated competent care/service based on the ages of the patients / customers served (supporting documentation must be in the evaluation or placed in the employee blue folder). Place an "X" in the boxes below for appropriate age groups served.

Neonates ☐ Infants ☐ Pediatrics ☐ Adolescents ☐ Adults ☒ Geriatrics ☐ Other: ☐

Overall Evaluation Summary

Imogene is a critical member of our hematology clinic. Her knowledge base truly exceeds many of the other PA's given her broad experience.

Overall Performance Rating:

N

A

P

S

Scale: N = Not Met; A = Approaching; P = Proficient; S = Surpassing

If "N" or "A" used, check problem area(s) listed below. Then check associated action plan(s) below problem area.

Job Specific	Customer Service	Communication	Effective team / group work	Other:
Education	Education	Education	Education	Education
Mentoring	Mentoring	Mentoring	Mentoring	Mentoring
Observation	Observation	Observation	Observation	Observation
Practice	Practice	Practice	Practice	Practice
Other:	Other:	Other:	Other:	Other:

Annual Learning and Self-Development Plan: The Learning and Self-Development Plan is used to set personal and professional goals which contribute to the staff member's growth and development and are not stated in the improvement plans listed on previous pages. Time frames should be stated with all staff development goals.

1. Growth Area: <i>Further knowledge in the management of hematology patients -</i>	Time Frame: <i>1 yr</i>
• Outcome: <i>Participate in case discussions</i>	<i>1 year</i>
• Action: <i>Attend educational meetings on hematology</i>	
• Evaluation: <i>Knowledge & how often checked by me</i>	
• Comments:	
2. Growth Area: <i>Further ability to order</i>	Time Frame: <i>1 yr</i>
• Outcome: <i>able to write prescription orders for hematology</i>	<i>1 year</i>
• Action: <i>Attend educational meetings, receive orders from me</i>	
• Evaluation: <i>Review of suggested orders written by T. Baker</i>	
• Comments:	
3. Growth Area:	Time Frame:
• Outcome:	
• Action:	
• Evaluation:	
• Comments:	

Employee Comments: (Optional)

Date	Employee Signature	Supervisor's Name	Supervisor's Signature	Department
7-9-03	<i>Jennifer Baker</i>	<i>A. Bockenstein</i>	<i>P. Baker</i>	<i>Int Med</i>

University of Michigan Health System

THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM

University of Michigan Hospitals and Health Centers

*Staff Performance Planning and Evaluation***Privacy and Confidentiality Statement
Workforce, Vendor, Visiting Observer and Scholar**

The University of Michigan Health System is committed to privacy and confidentiality. I understand that during the course of my duties or purpose at the Health System, I may have access to proprietary or confidential information. I agree to follow UMHS policies and procedures governing confidentiality and I will regard confidentiality as a duty and responsibility while part of the Health System workforce.

I understand that all proprietary and protected health information (collectively PHI) must be maintained confidentially. I have completed UMHS HIPAA training, and I agree to follow UMHS policies and procedures governing confidentiality and protection of PHI.

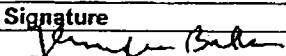
I may be an employee, faculty, student, trainee, visiting observer or scholar, volunteer, or vendor at UMHS. Regardless of how I may have access to PHI, at UMHS, I agree that I will not access, disclose or share PHI, except as necessary to complete my duties or purpose at the UMHS. I understand that I may not access any information on friends or family members unless a Release of Information form authorizes me to do so or unless I am permitted by University of Michigan policies. I understand that I am not authorized to use or disclose PHI to anyone who is not part of the UMHS workforce or an approved visiting observer or scholar except as provided in UMHS policies and procedures, by University of Michigan contract, or as required by law.

I understand that I must use all reasonable means to prevent PHI in my control from being disclosed, except as permitted by law. I will not reveal any of my passwords or share them with others. I will protect PHI from unauthorized access by keeping patient information secure, private and out of public viewing. When I need to discuss PHI, I will make reasonable efforts to prevent conversations from being overheard, including speaking in lowered tones and not discussing PHI in public areas such as elevators or the cafeteria. I will report unauthorized use or disclosure of PHI to the UMHS Privacy Director, 7300 Med Sci I, Box 0625, 734-615-4400, (866) 482-1252.

Protecting confidentiality of PHI means protecting it from unauthorized use or disclosure in any format, including oral, fax, photographic, written, or electronic form. If I keep patient notes on a handheld or laptop computer or other electronic device, I will ensure that my supervisor knows of and has approved such use and will keep this information secure and confidential. If, as part of my responsibility, I must take PHI off the premises, I will do so only with permission from my supervisor; I will protect PHI from disclosure; and will ensure that PHI is either returned to UMHS or destroyed.

When my employment, affiliation, visitation or assignment with UMHS ends, I will not take any PHI with me and I will not reveal any PHI that I had access to as a result of my duties at the UMHS. I will either return PHI to UMHS or destroy it in a manner that renders it unreadable and unusable by anyone else.

I understand that if I do not keep PHI confidential, or if I allow or participate in inappropriate disclosure or access to PHI, I will be subject to immediate disciplinary action, up to and including dismissal. I understand that unauthorized access, use, or disclosure may also violate federal and state law, and may result in criminal and civil penalties.

Signature	Date
	5/7/14/03

Revision date: May 7, 2003



University of Michigan
Health System

Staff Performance Planning and Evaluation



UMHHC Goals

1. Improve clinical outcomes and service.
2. Support the University's health and science academic mission.
3. Improve customer satisfaction in all groups.
4. Create a safe and healthful workplace
5. Enhance our financial strength and competitiveness
6. Participate with state and local partners to create healthy communities

Scale: N = Not Met; A = Approaching; P = Proficient; S = Surpassing		
UMHS Performance Expectations (For all employees)	Self Evaluation	Manager's Evaluation
1. Consistently demonstrates effective communication skills using: active listening, written, verbal and information technology skills	S	S
Comments:		
Improvement Plan:		
2. Protects confidential information	S	S
Comments:		
Improvement Plan:		
3. Complies with safety instructions, observes safe work practices, and provides input on safety issues and promotes a safe work environment	S	S
Comments:		
Improvement Plan:		
4. Consistently demonstrates the organization's values: Patients and families first, Accountability for outcomes, Respect for individuals, Teamwork, Never-ending Improvement, Empowerment, Responsibility for cost-effectiveness, and Service to the community (PARTNERS)	S	S
Comments:		
Improvement Plan:		
5. Consistently meets the organization's expectations for exemplary customer service	S	S
Comments:		
Improvement Plan:		
6. Adopts practices to improve work processes, enhance customer satisfaction and reduce wastes and costs	S	S
Comments:		
Improvement Plan:		
7. Works effectively with team/work group and others to accomplish organizational goals	S	S
Comments:		
Improvement Plan:		
8. Articulates role and participates in the Plan-Do-Check-Act (PDCA) cycle for continuous quality improvement	S	S
Comments:		
Improvement Plan:		

Jennifer Baker/Cancer Center		Physician Assistant	07/01/2001-6/30/2002
Staff Member Name/Dept Name	Employee ID #	Job Title / Classification	Evaluation Period

UMHS Performance Planning and Evaluation Committee 6/2001

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THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Staff Performance Planning and Evaluation

Scale: N = Not Met; A = Approaching; P = Proficient; S = Surpassing		
Job Specific Expectations (Must be tied to job description)	Self Evaluation	Manager's Evaluation
9. Attendance: (Job Specific)	S	S
Comments:		
Improvement Plan:		
10. Actively participates in ongoing projects related to clinical research protocols or critical pathways	S	S
Comments:		
Improvement Plan:		
11. Performs and interprets physical examinations	S	S
Comments:		
Improvement Plan:		
12. Provides routine and non-routine care prior to, during, and following chemotherapy	S	S
Comments:		
Improvement Plan:		
13. Actively participates in the education of nurses and other support personnel about issues related to protocols or critical pathways	S	S
Comments:		
Improvement Plan:		
14. Initiates (as per protocol or critical pathway) various laboratory or radiological studies	S	S
Comments:		
Improvement Plan:		
15. Performs invasive and non-invasive diagnostic and therapeutic procedures	S	S
Comments:		
Improvement Plan:		
16. Writes initial orders for chemotherapy, supportive care drug usage, non-narcotic medication per protocol or critical pathway within the restrictions of the law	S	S
Comments:		
Improvement Plan:		
17. Assists physicians in the recruiting and education of new patients for clinical protocols	S	S
Comments:		
Improvement Plan:		
18. Learning to routinely assess and record patient status.	S	S
Comments:		
Improvement Plan:		
19.		
Comments:		
Improvement Plan:		

Jennifer Baker/Cancer Center	XXXXXXXXXX	Physician Assistant	07/01/2001-6/30/2002
Staff Member Name/Dept Name	Employee ID #	Job Title / Classification	Evaluation Period

UMHS Performance Planning and Evaluation Committee 6/2001

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THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Staff Performance Planning and Evaluation

Peer / Staff / Customer Feedback

Competency / Mandatory Requirement Summary

Check institutional regulatory requirements met: ☒ Fire/Safety ☒ Corporate Compliance ☒ Review Unit Critical Incident Plan

List unit based competencies and unit/department mandatory requirements in boxes below. Check yes for met; no for not met.

Competency / Mandatory Met:	Y	N	Competency / Mandatory Met:	Y	N	Competency / Mandatory Met:	Y	N
BLS/emergency procedures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	infection control	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Cardiac arrest	<input checked="" type="checkbox"/>	<input type="checkbox"/>	professional billing compl.	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
hazard communication	<input checked="" type="checkbox"/>	<input type="checkbox"/>	emergency mgmt disaster	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

Action plan for competency(s) / mandatory(s) not met.

☒ ☐ Staff member has demonstrated competent care/service based on the ages of the patients / customers served (supporting documentation must be in the evaluation or placed in the employee blue folder).

Place an "X" in the boxes below for appropriate age groups served.

☐ Neonates ☐ Infants ☐ Pediatrics ☐ Adolescents ☒ Adults ☐ Geriatrics ☐ Other:

Overall Evaluation Summary

Employee is an excellent PA and has extensive knowledge & training in a broad area of laboratory including hygiene, biosafety, chemistry, lecture, symposium & autograph knowledge.

Overall Performance Rating:

Scale: N = Not Met; A = Approaching; P = Proficient S = Surpassing

☐ N ☐ A ☐ P ☒ S

If "N" or "A" used, check problem area(s) listed below. Then check associated action plan(s) below problem area.

Job Specific:	Customer Service	Communication	Effective team / group work	Other:
<input checked="" type="checkbox"/> Education	<input checked="" type="checkbox"/> Education	<input checked="" type="checkbox"/> Education	<input checked="" type="checkbox"/> Education	<input type="checkbox"/> Education
<input type="checkbox"/> Mentoring	<input checked="" type="checkbox"/> Mentoring	<input checked="" type="checkbox"/> Mentoring	<input checked="" type="checkbox"/> Mentoring	<input type="checkbox"/> Mentoring
<input checked="" type="checkbox"/> Observation	<input checked="" type="checkbox"/> Observation	<input checked="" type="checkbox"/> Observation	<input checked="" type="checkbox"/> Observation	<input type="checkbox"/> Observation
<input checked="" type="checkbox"/> Practice	<input checked="" type="checkbox"/> Practice	<input checked="" type="checkbox"/> Practice	<input checked="" type="checkbox"/> Practice	<input type="checkbox"/> Practice
<input type="checkbox"/> Other:	<input type="checkbox"/> Other:	<input type="checkbox"/> Other:	<input type="checkbox"/> Other:	<input type="checkbox"/> Other:

Annual Learning and Self-Development Plan: The Learning and Self-Development Plan is used to set personal and professional goals which contribute to the staff member's growth and development and are not stated in the improvement plans listed on previous pages. Time frames should be stated with all staff development goals.

1. Growth Area: <i>We kept to previous studies of low income users</i>	Time Frame
• Outcome: <i>Report</i>	<i>Common</i>
• Action:	
• Evaluation:	
• Comments: <i>Expenditure &</i>	
2. Growth Area: <i>Expansion of past phlebotomy studies</i>	Time Frame
• Outcome:	<i>1 year</i>
• Action:	
• Evaluation:	
• Comments:	
3. Growth Area:	Time Frame
• Outcome:	
• Action:	
• Evaluation:	
• Comments:	

Employee Comments: (Optional)

Date	Employee Signature	Supervisor's Name	Supervisor's Signature	Department
8/8/02	<i>Jennifer Baker</i>	Paula Bockenstedt, MD	<i>Paula Bockenstedt</i>	Int Med Hem/Onc

Jennifer Baker/Cancer Center		Physician Assistant	07/01/2001-6/30/2002
Staff Member Name/Dept Name	Employee ID #	Job Title / Classification	Evaluation Period

THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Staff Performance Planning and Evaluation

University of Michigan Health System Confidentiality Statement:¹

During the course of your employment at the University of Michigan Health System, you will have access to confidential information in oral, written, or electronic formats. This information may contain the individually identifiable health information of patients, M-CARE members, faculty, staff, students or M-CARE providers or employers or financial, business, scientific or research matters.

Confidential information may be accessed only by UMHS employees having a *job related need to know*. *Job related Need to know* is a principle that states an employee should access only the specific information necessary to perform their appointed duties. This means that unless the employee has a *job related need to know* the employee cannot access information on their family, friends other employees or any other person without explicit permission.² Employees with access to confidential information must assess the appropriateness of each use of information on a *need to know* basis.³ Confidential information may be accessed and/or released only by authorized UMHS employees and then only in accordance with university policies.⁴

It is the expectation of UMHS, that all employees exercise *due care* in any discussion, access, storage, interpretation, release or handling of confidential patient/student/M-CARE member/employee specific information. For example, passwords must not be shared. Users of general-use computers on inpatient units and in outpatient clinics must minimize the confidential screen to the task bar when work station is not attended, sign-off, or use other technology to minimize the risk of unauthorized access. When soliciting patients for research and fund raising, specific health system policies apply.

You may become aware of confidential information because it is part of your job responsibility, or you may encounter it unintentionally through your association with the Health System. Any employee who voluntarily allows or participates in inappropriate access and/or dissemination of confidential information may be subject to immediate disciplinary action, up to and including discharge. Employees are encouraged to report known or suspected violations of confidential information.

I understand that I must sign this statement as a condition of employment. My signature certifies that I have read and understand my responsibilities regarding confidential information.

Signature Jennifer Baker Date 8/8/02

¹ All persons employed by the University of Michigan Hospital and Health Centers (UMHHC), University of Michigan Medical School (UMMS), M-CARE, all UMHS temporary and contracted employees and volunteers and pertinent Michigan Health Corporation employees must sign this confidentiality statement upon hire and annually thereafter.

² Refer to Adolescent Policy, UMHHC Policy # 03-07-018.

³ Refer to Exhibit 1, UMHS Policy # 01-07-001.

⁴ Standard Practice Guide Policies #601.7, 601.11, 601.16, 201.46; UMHS Code of Conduct; UMHHC Policy #03-07-015; Replaces M-CARE Policies 1.41, 1.42; Michigan Visiting Nurse Corporation Policy #200.R1.080.00.

personnel/confidentiality statements/staff confidentiality statement UMHS final - June 25, 2001.doc 6/25/01

Jennifer Baker/Cancer Center		Physician Assistant	07/01/2001-6/30/2002
Staff Member Name/Dept Name	Employee ID #	Job Title / Classification	Evaluation Period

UMHS Performance Planning and Evaluation Committee 6/2001

Page 4 of 4

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University of Michigan
Health System

Staff Performance Planning and Evaluation



UMHHC Goals

1. Improve clinical outcomes and service.
2. Support the University's health and science academic mission.
3. Improve customer satisfaction in all groups.
4. Create a safe and healthful workplace
5. Enhance our financial strength and competitiveness
6. Participate with state and local partners to create healthy communities

Scale: N = Not Met; A = Approaching; P = Proficient; S = Surpassing		
UMHS Performance Expectations (For all employees)	Self Evaluation	Manager's Evaluation
1. Consistently demonstrates effective communication skills using: active listening, written, verbal and information technology skills		P to S
Comments: <i>Organized, keeps track of laboratory</i>		
Improvement Plan:		
2. Protects confidential information		P
Comments:		
Improvement Plan:		
3. Complies with safety instructions, observes safe work practices, and provides input on safety issues and promotes a safe work environment		S
Comments:		
Improvement Plan:		
4. Consistently demonstrates the organization's values: Patients and families first, Accountability for outcomes, Respect for individuals, Teamwork, Never-ending improvement, Empowerment, Responsibility for cost-effectiveness, and Service to the community (PARTNERS)		P
Comments:		
Improvement Plan:		
5. Consistently meets the organization's expectations for exemplary customer service		P
Comments:		
Improvement Plan:		

Jennifer Baker	[REDACTED]	Physician Assistant	7/1/00 -- 6/30/01
Staff Member Name	Social Security #	Job Title / Classification	Evaluation Period

THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Staff Performance Planning and Evaluation

Scale: N = Not Met; A = Approaching; P = Proficient; S = Surpassing		
UMHS Performance Expectations (For all employees)	Self Evaluation	Manager's Evaluation
6. Adopts practices to improve work processes, enhance customer satisfaction and reduce wastes and costs		P
Comments:		
Improvement Plan:		
7. Works effectively with team/work group and others to accomplish organizational goals		A
Comments: <i>During coming year would like person to learn more about pre-op management of congestive patients</i>		
Improvement Plan:		
8. Articulates role and participates in the Plan-Do-Check-Act (PDCA) cycle for continuous quality improvement		P
Comments:		
Improvement Plan:		

Scale: N = Not Met; A = Approaching; P = Proficient; S = Surpassing		
Job Specific Expectations (Must be tied to job description)	Self Evaluation	Manager's Evaluation
9. Attendance: (Job Specific)		P
Comments:		
Improvement Plan:		
10. Actively participates in ongoing projects related to clinical research protocols or critical pathways		A
Comments: <i>Needs to learn more about research protocols actively present in Cox Unit in order to assist in patient research. Needs to participate in generation of protocols under her current.</i>		
Improvement Plan: <i>Read over current protocols, assist Nurses in Patient Manual</i>		
11. Performs and interprets physical examinations		P-S
Comments:		
Improvement Plan:		

Jennifer Baker		Physician Assistant	7/1/00 – 6/30/01
Staff Member Name	Social Security #	Job Title / Classification	Evaluation Period

THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Staff Performance Planning and Evaluation

Scale: N = Not Met; A = Approaching; P = Proficient; S = Surpassing		
Job Specific Expectations (Must be tied to job description)	Self Evaluation	Manager's Evaluation
12. Provides routine and non-routine care prior to, during, and following chemotherapy		P-S
Comments: <i>Excellent care of new routine complex chemotherapy patients</i>		
Improvement Plan:		
13. Actively participates in the education of nurses and other support personnel about issues related to protocols or critical pathways		P
Comments:		
Improvement Plan:		
14. Initiates (as per protocol or critical pathway) various laboratory or radiological studies		P
Comments: <i>Good judgment as to when studies are needed</i>		
Improvement Plan:		
15. Perform invasive and non-invasive diagnostic and therapeutic procedures		S
Comments:		
Improvement Plan:		
16. Write initial orders for chemotherapy, supportive care drug usage, non-narcotic medications per protocol or critical pathway within the restrictions of the law		P
Comments: <i>Needs to try to write all chem orders in time not started to clinic</i>		
Improvement Plan: <i>Since clinic is horrendously understaffed already understanding plan to write and chem out of clinic setting</i>		
17. Assist physicians in the recruiting new patients for transplant programs in breast cancer, lymphoma, leukemia, and multiple myeloma		P
Comments:		
Improvement Plan:		

Jennifer Baker		Physician Assistant	7/1/00 – 6/30/01
Staff Member Name	Social Security #	Job Title / Classification	Evaluation Period

THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Staff Performance Planning and Evaluation

Scale: N = Not Met; A = Approaching; P = Proficient; S = Surpassing

Job Specific Expectations (Must be tied to job description)	Self Evaluation	Manager's Evaluation
18. Assists in treating patients prior to transplant and provide care post-transplant		P
Comments:		
Improvement Plan:		
19. Learning to routinely assess patient performance status and recording it.		P
Comments:		
Improvement Plan:		
Additional Comments from above		
<p><i>Jennifer is an excellent PA. She has adapted well to the extreme driving in this clinic. She is encouraged to call when not certain about results emanating from follow up labs as much as needed. During the coming year she is encouraged to become more involved in the up+coming protocols expected to emanate from recently submitted Cong Disease Center Grant. She is also expected to help in training & organizing patients down here along with other members of the Cong Unit.</i></p>		
Peer / Staff / Customer Feedback		

Jennifer Baker		Physician Assistant	7/1/00 - 6/30/01
Staff Member Name	Social Security #	Job Title / Classification	Evaluation Period

THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Staff Performance Planning and Evaluation

Competency / Mandatory Requirement Summary

Check institutional regulatory requirements met: ☒ Fire/Safety ☒ Corporate Compliance ☒ Review Unit Critical Incident Plan

List unit based competencies and unit/department mandatory requirements in boxes below. Check yes for met; no for not met.

Competency / Mandatory Met:	Y	N	Competency / Mandatory Met:	Y	N
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

Action plan for competency(s) / mandatory(s) not met:

Y N Staff member has demonstrated competent care/service based on the ages of the patients / customers served (supporting documentation must be in the evaluation or placed in the employee blue folder).
 Place an "X" in the boxes below for appropriate age groups served.

☐ Neonates ☐ Infants ☐ Pediatrics ☐ Adolescents ☒ Adults ☒ Geriatrics ☐ Other:

Overall Evaluation Summary

Good performance. Demonstrates self education in complex areas. Will learn how to apply new skills to long patients care & research protocol involvement in next year.

Overall Performance Rating:

Scale: N = Not Met; A = Approaching; P = Proficient S = Surpassing

N A P S
☐ ☐ ☒ ☐

If "N" or "A" used, check problem area(s) listed below. Then check associated action plan(s) below problem area.

<input type="checkbox"/> Job Specific	<input type="checkbox"/> Customer Service	<input type="checkbox"/> Communication	<input type="checkbox"/> Effective team / group work	<input type="checkbox"/> Other:
<input type="checkbox"/> Education	<input type="checkbox"/> Education	<input type="checkbox"/> Education	<input type="checkbox"/> Education	<input type="checkbox"/> Education
<input type="checkbox"/> Mentoring	<input type="checkbox"/> Mentoring	<input type="checkbox"/> Mentoring	<input type="checkbox"/> Mentoring	<input type="checkbox"/> Mentoring
<input type="checkbox"/> Observation	<input type="checkbox"/> Observation	<input type="checkbox"/> Observation	<input type="checkbox"/> Observation	<input type="checkbox"/> Observation
<input type="checkbox"/> Practice	<input type="checkbox"/> Practice	<input type="checkbox"/> Practice	<input type="checkbox"/> Practice	<input type="checkbox"/> Practice
<input type="checkbox"/> Other:	<input type="checkbox"/> Other:	<input type="checkbox"/> Other:	<input type="checkbox"/> Other:	<input type="checkbox"/> Other:

Jennifer Baker		Physician Assistant	7/1/00 – 6/30/01
Staff Member Name	Social Security #	Job Title / Classification	Evaluation Period

THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Staff Performance Planning and Evaluation

Annual Learning and Self-Development Plan: The Learning and Self-Development Plan is used to set personal and professional goals which contribute to the staff member's growth and development and are not stated in the improvement plans listed on previous pages. Time frames should be stated with all staff development goals.

1. Growth Area:	<i>Learning to dose & monitor patients on anti coagulants</i>	Time Frame	<i>1 year</i>
• Outcome:			
• Action:			
• Evaluation:			
• Comments:			
2. Growth Area:	<i>Learning to evaluate & dose patients with hemophagic disorders</i>	Time Frame	<i>6 mos</i>
• Outcome:			
• Action:			
• Evaluation:			
• Comments:			
3. Growth Area:	<i>Involvement & patient accrual in coagulation disorder clinical trials & projects</i>	Time Frame	<i>6 mos</i>
• Outcome:			
• Action:			
• Evaluation:			
• Comments:			
4. Growth Area:		Time Frame	
• Outcome:			
• Action:			
• Evaluation:			
• Comments:			

Employee Comments: (Optional)

Date	Employee Signature	Supervisor's Name	Supervisor's Signature	Department
8/3/01	<i>Jennifer Baker</i>	Paula Bockenstedt, MD	<i>Paula Bockenstedt</i>	Cancer Center (hem/onc)

Jennifer Baker		Physician Assistant	7/1/00 – 6/30/01
Staff Member Name	Social Security #	Job Title / Classification	Evaluation Period

THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Staff Performance Planning and Evaluation

University of Michigan Health System Confidentiality Statement:

During the course of your employment at the University of Michigan Health System, you will have access to confidential information in oral, written, or electronic formats. This information may contain the individually identifiable health information of patients of M-CARE, individually identifiable information of faculty, staff, students or M-CARE providers, or employers or financial, business, scientific or research matters.

Confidential information may be accessed only by UMHS employees having a job related need to know. Job related need to know is a principal that states an employee should access only the specific information necessary to perform their appointed duties. This means that unless the employee has a job related need to know the employee cannot access information on their family, friends, other employees, or any other person without explicit permission. Employees with access to confidential information must assess the appropriateness of each use of information on a need to know basis. Confidential information may be accessed and/ or released only by authorized UMHS employees and then only in accordance with university policies.


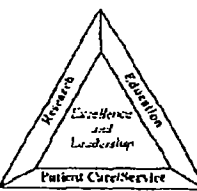
It is the expectation of UMHS, that all employees exercise due care in any discussion, access, storage, interpretation, release or handling of confidential patient/student/M-Care member/employee specific information. For example, passwords must not be shared. Users of general-use computers on inpatient units and in outpatient clinics must minimize the confidential screen to the task bar, sign-off, or use other technology to minimize the risk of unauthorized access. When soliciting patients for research and fund raising, specific health system policies apply.

You may become aware of confidential information because it is part of your job responsibility, or you may encounter it unintentionally through your association with the Health System. Any employee who voluntarily allows or participates in inappropriate access and/or dissemination of confidential information may be subject to immediate disciplinary action, up to and including discharge. Employees are encouraged to report known or suspected violations of confidential information.

I understand that I must sign this statement as a condition of employment.

Employee Signature	Date
<i>Jennifer Baker</i>	8/3/01

Jennifer Baker		Physician Assistant	7/1/00 – 6/30/01
Staff Member Name	Social Security#	Job Title / Classification	Evaluation Period

 <p>University of Michigan Health System</p>		<p>1. Improve clinical outcomes and service. 2. Support the University's health and science academic mission. 3. Improve customer satisfaction in all groups. 4. Create a safe and healthful workplace 5. Enhance our financial strength and competitiveness 6. Participate with state and local partners to create healthy communities</p>
<p>Staff Performance Planning and Evaluation</p>		

Scale: N = Not Met; A = Approaching; P = Proficient; S = Surpassing		
UMHS Performance Expectations (For all employees)	Self Evaluation	Manager's Evaluation
1. Consistently demonstrates effective communication skills using: active listening, written, verbal and information technology skills	S	S
Comments:		
Improvement Plan:		
2. Protects confidential information	P	S
Comments:		
Improvement Plan:		
3. Complies with safety instructions, observes safe work practices, and provides input on safety issues and promotes a safe work environment	P	S
Comments:		
Improvement Plan:		
4. Consistently demonstrates the organization's values: Patients and families first, Accountability for outcomes, Respect for individuals, Teamwork, Never-ending improvement, Empowerment, Responsibility for cost-effectiveness, and Service to the community (PARTNERS)	S	S
Comments:		
Improvement Plan:		
5. Consistently meets the organization's expectations for exemplary customer service	P	P
Comments:		
Improvement Plan:		

Jennifer Baker Staff Member Name	[REDACTED] Social Security #	Physician Assistant Job Title / Classification	July 1999 - July 2000 Evaluation Period
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THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Performance Planning and Evaluation

Name Jennifer BakerSS# [REDACTED]Period Covered: From June 3 to July 27

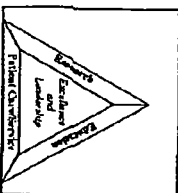
Performance Expectations	Peer/Staff/ Customer Evaluation			Self Evaluation			Faculty Evaluation			Competency Gap?*	Learning/Improvement Plan
	1	2	3	1	2	3	1	2	3		
1. Accomplishes job expectations as defined by job description			X		X				X		
Operations Management											
2. Protects confidential information			X		X				X		
3. Actively communicates and shares information with others (up, down, and across boundaries).			X		X				X		
4. Maintains all safety, regulatory, and legal requirements.			X		X				X		
5. Demonstrates ethical behavior.			X		X				X		
Customer Service & Process Improvement											
6. Demonstrates customer service standards.			X		X				X		
7. Works to resolve customer complaints when identified.			X		X				X		
8. Identifies ways to improve work processes, enhance customer satisfaction, and reduce wastes and costs.			X		X				X		

Rating Scale:

1 Not Demonstrated (Not Met)

2 Inconsistently Demonstrated (Not Met)

3 Consistently Demonstrated (Met)



- UMHHC Goals**
1. Improve clinical care and service.
 2. Improve customer satisfaction.
 3. Improve our cost-competitiveness.
 4. Create a safe and healthful learning environment.
 5. Create healthy communities.

* **Competency Gap** - If a performance expectation has not been met, complete an assessment of the related competency.

** Indicates an additional performance expectation for management staff.

Perplan/1998/rmm/jlc

THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Performance Planning and Evaluation

Name Jennifer Baker

SS# [REDACTED]

Peer/Staff

Self Eval.

Faculty

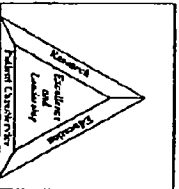
Not Met/Not Met/Not Met/Not Met/Not Met/Not Met

Period Covered: From June 3 to July 27
 Competency bag?

Learning and Development:	1	2	3	1	2	3	1	2	3	Yes	No
9. Actively solicits and uses feedback from peers, staff, customers, and supervisors to improve work.			X			X			X		
10. Actively participates in ongoing learning opportunities and self-development.			X			X			X		
Strategic Alignment											
11. Demonstrates behaviors that are consistent with the organization's values.			X			X			X		
Teamwork											
12. Resolves conflict effectively.			X			X			X		
13. Effectively works with team members to accomplish work area goals.			X			X			X		

Rating Scale:

1 Not Demonstrated (Not Met)
 2 Inconsistently Demonstrated (Not Met)
 3 Consistently Demonstrated (Met)



- UMHHC Goals**
1. Improve clinical care and service.
 2. Improve customer satisfaction.
 3. Improve our cost-competitiveness.
 4. Create a safe and healthful learning environment.
 5. Create healthy communities.

* **Competency Gap** - If a performance expectation has not been met, complete an assessment of the related competency.

** Indicates an additional performance expectation for management staff.

PerPlan/1998/mm/llc

THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Performance Planning and Evaluation

Overall Evaluation and Comments:

- ① Excellent nomination to self education
- ② Appropriate care in primary, well liked by patients
- ③ Demonstrates ability to take patients in outpatient setting
- ④ Great record keeping system

Overall Performance Rating: Check for annual discussion only	Unsatisfactory (1)	Below Expectations (2)	Fully Achieves (3)	Far Exceeds (4)
			3+	

Employee Name Jennifer Baker Signature Jennifer Baker Date 7/29/99 Page 3

Job Title Physician Assistant Department Hematology SS# [REDACTED]

Manager's Name Paula Bockenstedt, M.D. Signature _____ Date: _____

THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Performance Planning and Evaluation

Annual Learning and Self-Development Plan

The Learning and Self-Development Plan is used to set personal and professional goals which contribute to the staff member's growth and development. In addition, if performance falls below the "fully achieves expectations" level, the development plan should be used to identify an action plan to improve performance. Time frames should be stated with all staff development goals.

Identified Growth Areas	Outcomes	Actions to be Taken	Evaluation/Measurement Criteria

Confidentiality Statement:

I have read and understand the University of Michigan Health System's policies on confidentiality of patient care information (policy # 03-07-015). Patient care information, whether in written, unwritten, or electronic computer system form, may be accessed only by UMHS employees who need that information to perform their UMHS job responsibilities. Patient care information may only be released to individuals outside the health system by authorized UMHS employees and then only on the prior written permission of the patients or patient's legal representative, or as allowed by law.

I understand that this information belongs to the patient and I am only the caretaker and must guard the information appropriately. This includes, but is not limited to, keeping patient information secure, private, and out of public viewing, protecting computerized data by logging off when leaving a work station, and keeping information secure by not discussing patient specific issues in public areas such as elevators, etc.

I understand that if I do not keep patient information confidential, or if I allow or participate in the inappropriate dissemination of or access to patient care information, I shall be subject to immediate disciplinary action, up to and including dismissal.

Employee Name Jennifer Baker Signature Jennifer Baker Date 7/29/99 Page 4

Job Title Physician Assistant Department Hematology SS# [REDACTED]

Manager's Name Paula Beckenstedt M.D. Signature Paula Beckenstedt Date: 7/29/99

Employee Performance EvaluationsName: *Jennifer Baker* S.S.#:Date Prepared: *8/12/98*Title: *Physician Assistant* BMTPEvaluation Period: *7/1/97 → 6/30/98***I. Performance Factors****Comments****Job Knowledge**

- Demonstrates clear understanding of the necessary facts, work methods, & techniques needed to perform the job.
- Proceeds independently with assigned tasks.
- Recognizes problems and exerts initiative in problem solving.

*Excellent - meet & exceeds all expectations***Quality of Work**

- Utilizes necessary pertinent technical skills appropriately.
- Demonstrates accuracy, completeness & thoroughness.
- Low incidence of repeating work.
- Neatness in finished job/accurate results

*Excellent***Work Output**

- Meets or exceeds expected levels of work output at acceptable level of quality and in a reasonable time frame.
- Manages time effectively to complete tasks.

*Excellent***Planning & Organizations**

- Set realistic goals & organizes resources to achieve them.
- Plans & organizes daily activities & long range assignments by setting priorities.
- Able to complete tasks within established time frames.

Very good

Adaptability & Motivation <ul style="list-style-type: none"> Displays interest in work & motivation to achieve high levels of performance. 	<i>Very Good</i>
Initiative <ul style="list-style-type: none"> Shows initiative & motivation when approaching tasks. Willing to learn new tasks & assumes increased responsibility. Generates ideas for increased efficiency. 	<i>Very Good</i>
Communication <ul style="list-style-type: none"> Uses effective communication skills with individuals inside & outside the University Medical Center. Seeks and utilizes advice from supervisor when necessary. Keeps the supervisor informed of significant & pertinent information/progress/complaints.. Displays ability & willingness to work with others. Greets patients and guests courteously. 	<i>Very Good</i>
Cost Effectiveness <ul style="list-style-type: none"> Follows set procedures & protocols for use & maintenance of equipment & supplies. Exercises proper care & use of equipment and supplies. Takes steps & employs measures aimed at quality control and cost effectiveness. 	<i>Very good</i>
Attendance <ul style="list-style-type: none"> Maintains reliable & punctual attendance. 	<i>Excellent</i>

II. Additional supervisor's comments

Overall she has done an excellent job. Has taken care of critically ill patient & has dealt with family & staff in a professional manner

III. Employee's comments: (Optional)

IV. Employee Development Plan: Identify areas where added knowledge/skills are needed & time frame for action:

Over the next 6 months will become more familiar with outpatient care of BMT patient. Will also re-reinforce various techniques such as BM biopsy L.P. & skin punch biopsy.

Completed Mandatory Programs

BCLS	<input checked="" type="radio"/> Yes	No
Fire/Safety	<input checked="" type="radio"/> Yes	No
Infection Control	<input checked="" type="radio"/> Yes	No
General Safety	<input checked="" type="radio"/> Yes	No
Safe Practices		
Infectious Diseases	<input checked="" type="radio"/> Yes	No

Attendance

Unscheduled absences from work:

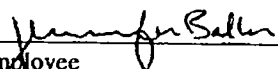
Family Care (3 days allowed) 16 hours or _____ occasions
Other _____ hours or _____ occasions

Confidentiality Statement:

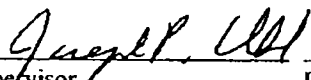
I have read and understand the University of Michigan Medical Center policies on confidentiality of patient care information. Patient care information, whether written, unwritten, or electronic computer system form, may be accessed only by UMMC employees who need that information to perform their UMMC job responsibilities. Patient care information may only be released to individuals outside the Medical Center by authorized UMMC employees and then only on the prior written permission of the patient or patient's legal representative, or as allowed by law.

I understand that if I do not keep patient information confidential, or if I allow or participate in the inappropriate dissemination of or access t patient information, I shall be subject to immediate disciplinary action, up to and including dismissal.

Signatures:


Employee

8/12/98
Date

 8-12-98
Supervisor Date

Employee Performance Evaluations

Name Jennifer Baker S.S.# [REDACTED] Date Prepared 8/14/97
Title Physician Assistant BMTP Evaluation Period 7/1/96 - 6/30/97

I. Performance FactorsComments

Job Knowledge <ul style="list-style-type: none"> • Demonstrates clear understanding of the necessary facts, work methods, & techniques needed to perform the job. • Proceeds independently with assigned tasks. • Recognizes problems & exerts initiative in problem solving. 	Jennifer meets or exceeds all of these points.
Quality of Work <ul style="list-style-type: none"> • Utilizes necessary pertinent technical skills appropriately. • Demonstrates accuracy, completeness & thoroughness. • Low incidence of repeating work. • Neatness in finished job/accurate results. 	Jennifer meets or exceeds all of these points.
Work Output <ul style="list-style-type: none"> • Meets or exceeds expected levels of work output at acceptable level of quality and in a reasonable timeframe. • Manages time effectively to complete tasks. 	Jennifer meets or exceeds all of these points.
Planning & Organizations <ul style="list-style-type: none"> • Set realistic goals & organizes resources to achieve them. • Plans & organizes daily activities & long range assignments by setting priorities. • Able to complete tasks within established timeframes. 	Jennifer meets or exceeds all of these points.
Adaptability & Motivation <p>Displays interest in work & motivation to achieve higher levels of performance.</p>	Jennifer meets or exceeds all of these points.

Performance Factors (cont.)**Comments**

Initiative <ul style="list-style-type: none"> • Shows initiative & motivation when approaching tasks. • Willing to learn new tasks & assumes increased responsibility. • Generates ideas for increased efficiency. 	Jennifer meets or exceeds all of these points.
Communication <ul style="list-style-type: none"> • Uses effective communication skills with individuals inside & outside the University Medical Center. • Seeks and utilizes advice from supervisor when necessary. • Keeps the supervisor informed of significant & pertinent information/progress/complaints. • Displays ability & willingness to work with others. • Greets patients and guests courteously. 	Jennifer meets or exceeds all of these points.
Cost Effectiveness <ul style="list-style-type: none"> • Follows set procedures & protocols for use & maintenance of equipment & supplies. • Exercises proper care & use of equipment and supplies. • Takes steps & employs measures aimed at quality control and cost effectiveness. 	Jennifer meets or exceeds all of these points.
Attendance <ul style="list-style-type: none"> • Maintains reliable & punctual attendance. 	Jennifer is reliable and punctual.

II. Additional supervisor's comments:

Jennifer is an important member to the BMT team. She has exceeded all expectations in patient care, adaptability, and technical proficiency. She is an excellent caregiver. Her continual comments regarding our method of operations are well thought out, and have improved the BMT service. It has my pleasure working with Jennifer. She always goes the extra mile for our patients.

III. Employee's comments: (Optional)

IV. Employee Development Plan: Identify areas where added knowledge/skills are needed & time frame for action:

1. Become more proficient at procedure skills, (LP's BM Bx's).

Confidentiality Statement:

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I understand that if I do not keep patient information confidential, or if I allow or participate in the inappropriate dissemination of or access to patient information, I shall be subject to immediate disciplinary action, up to and including dismissal.

Signatures:

Employee

Date

Supervisor

Date

Employee Performance Evaluations

Name Jennifer Baker S.S.# [REDACTED] Date Prepared 8/14/97
Title Physician Assistant BMTP Evaluation Period 7/1/96 - 6/30/97

I. Performance FactorsComments

Job Knowledge <ul style="list-style-type: none"> • Demonstrates clear understanding of the necessary facts, work methods, & techniques needed to perform the job. • Proceeds independently with assigned tasks. • Recognizes problems & exerts initiative in problem solving. 	Jennifer meets or exceeds all of these points.
Quality of Work <ul style="list-style-type: none"> • Utilizes necessary pertinent technical skills appropriately. • Demonstrates accuracy, completeness & thoroughness. • Low incidence of repeating work. • Neatness in finished job/accurate results. 	Jennifer meets or exceeds all of these points.
Work Output <ul style="list-style-type: none"> • Meets or exceeds expected levels of work output at acceptable level of quality and in a reasonable timeframe. • Manages time effectively to complete tasks. 	Jennifer meets or exceeds all of these points.
Planning & Organizations <ul style="list-style-type: none"> • Set realistic goals & organizes resources to achieve them. • Plans & organizes daily activities & long range assignments by setting priorities. • Able to complete tasks within established timeframes. 	Jennifer meets or exceeds all of these points.
Adaptability & Motivation <p>Displays interest in work & motivation to achieve higher levels of performance.</p>	Jennifer meets or exceeds all of these points.

Performance Factors (cont.)	Comments
Initiative <ul style="list-style-type: none"> • Shows initiative & motivation when approaching tasks. • Willing to learn new tasks & assumes increased responsibility. • Generates ideas for increased efficiency. 	Jennifer meets or exceeds all of these points.
Communication <ul style="list-style-type: none"> • Uses effective communication skills with individuals inside & outside the University Medical Center. • Seeks and utilizes advice from supervisor when necessary. • Keeps the supervisor informed of significant & pertinent information/progress/complaints. • Displays ability & willingness to work with others. • Greets patients and guests courteously. 	Jennifer meets or exceeds all of these points.
Cost Effectiveness <ul style="list-style-type: none"> • Follows set procedures & protocols for use & maintenance of equipment & supplies. • Exercises proper care & use of equipment and supplies. • Takes steps & employs measures aimed at quality control and cost effectiveness. 	Jennifer meets or exceeds all of these points.
Attendance <ul style="list-style-type: none"> • Maintains reliable & punctual attendance. 	Jennifer is reliable and punctual.

II. Additional supervisor's comments:

Jennifer is an important member to the BMT team. She has exceeded all expectations in patient care, adaptability, and technical proficiency. She is an excellent caregiver. Her continual comments regarding our method of operations are well thought out, and have improved the BMT service. It has my pleasure working with Jennifer. She always goes the extra mile for our patients.

III. Employee's comments: (Optional)**IV. Employee Development Plan: Identify areas where added knowledge/skills are needed & time frame for action:**

1. Become more proficient at procedure skills, (LP's BM Bx's).

Confidentiality Statement:

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Signatures:

Jennifer Baller
Employee

Date

[Signature]
Supervisor

2/15/13
Date

RECEIVED

AUG 29 1996

Employee Performance Evaluations

Name Jennifer Baker **S.S.#** [REDACTED] **Date Prepared** 8/21/96 **HUMAN RESOURCES**
Title Physician Assistant **BMTP** **Evaluation Period** 7/1/95-6/30/96

I. Performance FactorsComments

Job Knowledge <ul style="list-style-type: none"> • Demonstrates clear understanding of the necessary facts, work methods, & techniques needed to perform the job. • Proceeds independently with assigned tasks. • Recognizes problems & exerts initiative in problem solving. 	Jennifer meets or exceeds all of these points.
Quality of Work <ul style="list-style-type: none"> • Utilizes necessary pertinent technical skills appropriately. • Demonstrates accuracy, completeness & thoroughness. • Low incidence of repeating work. • Neatness in finished job/accurate results. 	Jennifer meets or exceeds all of these points.
Work Output <ul style="list-style-type: none"> • Meets or exceeds expected levels of work output at acceptable level of quality and in a reasonable timeframe. • Manages time effectively to complete tasks. 	Jennifer meets or exceeds all of these points.
Planning & Organizations <ul style="list-style-type: none"> • Set realistic goals & organizes resources to achieve them. • Plans & organizes daily activities & long range assignments by setting priorities. • Able to complete tasks within established timeframes. 	Jennifer meets or exceeds all of these points.
Adaptability & Motivation <p>Displays interest in work & motivation to achieve higher levels of performance.</p>	Jennifer meets or exceeds all of these points.

00164

Performance Factors (cont.)	Comments
<p>Initiative</p> <ul style="list-style-type: none"> • Shows initiative & motivation when approaching tasks. • Willing to learn new tasks & assumes increased responsibility. • Generates ideas for increased efficiency. 	Jennifer meets or exceeds all of these points.
<p>Communication</p> <ul style="list-style-type: none"> • Uses effective communication skills with individuals inside & outside the University Medical Center. • Seeks and utilizes advice from supervisor when necessary. • Keeps the supervisor informed of significant & pertinent information/progress/complaints. • Displays ability & willingness to work with others. • Greets patients and guests courteously. 	Jennifer meets or exceeds all of these points.
<p>Cost Effectiveness</p> <ul style="list-style-type: none"> • Follows set procedures & protocols for use & maintenance of equipment & supplies. • Exercises proper care & use of equipment and supplies. • Takes steps & employs measures aimed at quality control and cost effectiveness. 	Jennifer meets or exceeds all of these points.
<p>Attendance</p> <ul style="list-style-type: none"> • Maintains reliable & punctual attendance. 	Jennifer is reliable and punctual.

II. Additional supervisor's comments:

Jennifer has been an important addition to the BMT team. She has exceeded all expectations in patient care, adaptability, and technical proficiency. She is an excellent caregiver. Her comments regarding our method of operations are well thought out, and have improved the BMT service. It has my pleasure working with Jennifer. She always goes the extra mile for our patients.

III. Employee's comments: (Optional)**IV. Employee Development Plan: Identify areas where added knowledge/skills are needed & time frame for action:**

1. Become more proficient at procedure skills, (LP's BM Bx's). Increase skills in certain subspecialty exam, (i.e. Neruo).

Confidentiality Statement:

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I understand that if I do not keep patient information confidential, or if I allow or participate in the inappropriate dissemination of or access to patient information, I shall be subject to immediate disciplinary action, up to and including dismissal.

Signatures:

Jennifer Butler
Employee

8/21/96
Date

[Signature]
Supervisor

8/24/96
Date

Dept. Review Date 8/21/96

Page 3 of 3



Scale: N = Not Met; A = Approaching; P = Proficient; S = Surpassing		
UMHS Performance Expectations (For all employees)		
	Self Evaluation	Manager's Evaluation
1. Consistently demonstrates effective communication skills using: active listening, written, verbal and information technology skills		S
Comments:		
Improvement Plan:		
2. Protects confidential information		S
Comments:		
Improvement Plan:		
3. Complies with safety instructions, observes safe work practices, and provides input on safety issues and promotes a safe work environment		S
Comments:		
Improvement Plan:		
4. Consistently demonstrates the organization's values: Patients and families first, Accountability for outcomes, Respect for Individuals, Teamwork, Never-ending Improvement, Empowerment, Responsibility for cost-effectiveness, and Service to the community (PARTNERS)		S
5. Comments:		
Improvement Plan:		
6. Consistently meets the organization's expectations for exemplary customer service		S
Comments:		
Improvement Plan:		
7. Adopts practices to improve work processes, enhance customer satisfaction and reduce wastes and costs		S
Comments:		
Improvement Plan:		
8. Works effectively with team/work group and others to accomplish organizational goals		S
Comments:		
Improvement Plan:		
9. Articulates role and participates in the Plan-Do-Check-Act (PDCA) cycle for continuous quality improvement		S
Comments:		
Improvement Plan:		

PLEASE TYPE OR PRINT INFORMATION

Jennifer Baker	Int Med-HemOnc		Physician Assistant	07/01/2004- 06/30/2005
Staff Member Name	Department Name	Employee ID #	Job Title / Classification	Evaluation Period

THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM
University of Michigan Hospitals and Health Centers
Staff Performance Planning and Evaluation

Scale: N = Not Met; A = Approaching; P = Proficient; S = Surpassing		
UMHS Performance Expectations (For all employees)	Self Evaluation	Manager's Evaluation
10. Demonstrates behaviors which support our organization's commitment to diversity, contributing toward an inclusive and respectful work environment for all		S
Comments:		
Improvement Plan:		
11. Demonstrates knowledge of the organization's policies and procedures (including the Speak Up With Safety Concerns policy) to ensure the timely reporting of patient safety events and/or situations		S
Comments:		
Improvement Plan:		
12. Attendance: (Job Specific)		S
Comments:		
Improvement Plan:		
13. Actively participates in ongoing projects related to clinical research protocols or critical pathways		S
Comments:		
Improvement Plan:		
14. Performs and interprets physical examinations		S
Comments:		
Improvement Plan:		
15. Provides patient care prior to, during, and following chemotherapy		S
Comments:		
Improvement Plan:		
16. Actively participates in the education of nurses and other support personnel about issues related to protocols or critical pathways when asked.		S
Comments:		
Improvement Plan:		
17. Initiates (per protocol or critical pathway) various laboratory or radiological studies.		S
Comments:		
Improvement Plan:		
18. Performs invasive and non-invasive diagnostic and therapeutic procedures.		S
Comments:		
Improvement Plan:		
19. Prepares initial orders for chemotherapy, supportive care drug usage, non-narcotic medications per protocol or critical pathway within the restrictions of the law.		S
Comments:		
Improvement Plan:		
20.		
Comments:		

PLEASE TYPE OR PRINT INFORMATION

Jennifer Baker	Int Med-HemOnc	[REDACTED]	Physician Assistant	07/01/2004- 06/30/2005
Staff Member Name	Department Name	Employee ID #	Job Title / Classification	Evaluation Period

UMHS Performance Planning and Evaluation Committee (origination 6/2001); Updated: 03/03/2005 for 2004-2005

Page 2 of 5

THE UNIVERSITY OF MICHIGAN HEALTH SYSTEM

University of Michigan Hospitals and Health Centers

Staff Performance Planning and Evaluation

Improvement Plan:

Peer / Staff / Customer Feedback

Competency / Mandatory Requirement Summary

Check institutional regulatory requirements met:

Fire/Safety

Corporate Compliance

Unit Critical Incident Plan

Patient Safety

List unit based competencies and unit/department mandatory requirements in boxes below. Check yes for met; no for not met.

Competency / Mandatory Met: ☒ Y ☐ N Competency / Mandatory Met: ☒ Y ☐ N Competency / Mandatory Met: ☒ Y ☐ N

Action plan for competency(s) / mandatory(s) not met:

Y N Staff member has demonstrated competent care/service based on the ages of the patients / customers served (supporting documentation must be in the evaluation or placed in the employee blue folder).
Place an "X" in the boxes below for appropriate age groups served.

Neonates

Infants

Pediatrics

Adolescents

Adults

Geriatrics

Other:

Overall Evaluation Summary

Jennifer is an outstanding PA who functions at an extremely high level and has exceptional skills in a broad number of areas in hematology.

Overall Performance Rating:

N

A

P

S

Scale: N = Not Met; A = Approaching; P = Proficient S = Surpassing

If "N" or "A" used, check problem area(s) listed below. Then check associated action plan(s) below problem area.

Job Specific	Customer Service	Communication	Effective team / group work	Other:
Education	Education	Education	Education	Education
Mentoring	Mentoring	Mentoring	Mentoring	Mentoring
Observation	Observation	Observation	Observation	Observation
Practice	Practice	Practice	Practice	Practice
Other:	Other:	Other:	Other:	Other:

Annual Learning and Self-Development Plan: The Learning and Self-Development Plan is used to set personal and professional goals which contribute to the staff member's growth and development and are not stated in the improvement plans listed on previous pages. Time frames should be stated with all staff development goals.

1. Growth Area: *Anti-coagulant Druging Mechanisms & Peri-Op Anesthesia* Time Frame• Outcome: *Management*

• Action:

• Evaluation:

• Comments:

2. Growth Area: *Management / Design of Factor Products in Hematology & VMD* Time Frame

• Outcome:

• Action:

• Evaluation:

• Comments:

3. Growth Area: Time Frame

• Outcome:

• Action:

• Evaluation:

• Comments:

Employee Comments: (Optional)

08/02/05

Date

Employee Signature

Bockenstall

Supervisor's Name

Paul J. Mammert MD

Supervisor's Signature

Hem

Department

PLEASE TYPE OR PRINT INFORMATION

Jennifer Baker

Int Med-HemOnc

Physician Assistant

07/01/2004- 06/30/2005

Staff Member Name

Department Name

Employee ID #

Job Title /
Classification

Evaluation Period

--	--	--	--	--

**University of Michigan Health System
Confidentiality and Security Statement
Workforce, Vendor, Visiting Observer and Scholar**

The University of Michigan Health System is committed to protecting the confidentiality and security of Information. I may be an employee, faculty, student, trainee, visiting observer, visiting health professional or scholar, volunteer, or vendor at UMHS. During the course of my duties or purpose at the Health System, I may have access to proprietary or confidential information. I understand that all proprietary and protected health information (collectively PHI) must be maintained confidentially, and in a secure fashion.

I agree to follow all UMHS policies and procedures governing the confidentiality and security of PHI in any form, including oral, fax, photographic, written, or electronic. I will regard both confidentiality and security as a duty and responsibility while part of the Health System workforce, or during my involvement with UMHS as a non-workforce member. I have completed UMHS HIPAA training.

I agree that I will not access, release, or share PHI, except as necessary to complete my duties or purpose at the UMHS. I understand that I may not access any information on friends or family members unless a Release of Information form authorizes me to do so, unless doing so is a necessary part of my job duties, or unless I am otherwise permitted to do so by UMHS policies. I understand that I am not authorized to use or release PHI to anyone who is not part of the UMHS workforce or an approved visiting observer, health professional, or scholar except as provided in UMHS policies and procedures, by University of Michigan contract, or as required by law.

I agree that I will use all reasonable means to protect the security of PHI in my control, and to prevent it from being accessed or released, except as permitted by law. I will use only the access privileges I have been authorized to use, and will not reveal any of my passwords or share access with others. I will take precautions to avoid inadvertently revealing PHI; for example, I will use workstations in a safe manner and will make reasonable efforts to prevent conversations from being overheard, including speaking in lowered tones and not discussing PHI in public areas. If I keep patient notes on a handheld or laptop computer or other electronic device, I will ensure that my supervisor knows of and has approved such use and I will keep this information secure and confidential. If, as part of my responsibility, I must take PHI off the premises, I will do so only with permission from my supervisor; I will protect PHI from disclosure; and will ensure that the PHI is either returned to UMHS or destroyed.

I agree that when my employment, affiliation, visitation or assignment with UMHS ends, I will not take any PHI with me and I will not reveal any PHI that I had access to as a result of my duties at the UMHS. I will either return PHI to UMHS or destroy it in a manner that renders it unreadable and unusable by anyone else.

I agree to immediately report unauthorized use or disclosure of PHI (including theft), or security issues affecting systems that contain or give access to PHI, to my supervisor, or to the UMHS Compliance and Privacy Office, 7300 Medical Science I, Box 0625, (734) 615-4759, (888) 296-2481.

I understand that if I do not keep PHI confidential, or if I allow or participate in inappropriate disclosure or access to PHI, I will be subject to immediate disciplinary or corrective action, up to and including dismissal or loss of access privileges to UMHS property and facilities. I understand that unauthorized access, use, or disclosure of PHI may also violate federal and state law, and may result in criminal and civil penalties against the University and/or me personally.

Signature *Jennifer Baker*

Date 08/02/05

Printed Name Jennifer Baker

Employee ID Number (if applicable)

Revision date: April 19th, 2004

Reg#: [REDACTED] Name: KEENE, JENNIFER EVE DOB: [REDACTED] Sex: F Age: 42 Years User Name: DONNAMAR

Document Type: LET/NOTE-RV

Case Date: 08/09/2011

Electronically signed documents are the authoritative medical record copy. Unsigned documents are considered preliminary and may be modified. Documents dated prior to 2001 may be signed on paper.

Printed: 08/25/2011 11:30 AM

Re: Keene, Jennifer Eve

Reg No: [REDACTED]

DOB: [REDACTED]

Date of Service: 08/09/2011

This is from 9 to 10 a.m.

This is an outpatient individual psychotherapy medication management.

SUBJECTIVE: The patient was seen in follow up. CareWeb notes were reviewed.

OBJECTIVE: The patient is still not feeling well. She is now off work due to medical problems related to bipolar depression and postpartum depression. She has contacted WorkConnections to make sure that they have her paperwork. She is not feeling suicidal or homicidal, but she does not feel well. She feels anxious most of the time. She does not feel comfortable. She is unable to totally concentrate and process. She just does not feel like herself. Her sleep is being interrupted due to her children and she is very stressed at home. We gave her a refill for her lithium carbonate and trazodone.

ASSESSMENT AND PLAN: We will see her back next Tuesday.

DIAGNOSES: Bipolar depressed and postpartum depression and I gave her a slip to fill out and get her lithium level drawn this morning. She also needed a refill for the trazodone 50 mg. I again went over the serotonin issues with trazodone and emsam and then discussed emsam 6mg as MAO like.. and not to take narcotics and the issue of hypertensive crisis at a higher dose.

Her lithium level was checked and is .93. I called her this morning to discuss whether we should try to get it a bit lower to perhaps help her feel better. Sometimes when it is that high, she doesn't feel well, historically .

Michelle Riba, MD
Professor

//Electronically signed by Michelle Riba, MD/3614 on 08/10/2011 10:35:32//

Dictated by:	Michelle Riba, MD/3614
Dictate Date/Time:	08/09/2011 10:25:52
Sent to EHR Date/Time:	08/10/2011 08:34:06
Import Source:	Stentel on eScription
Document ID:	001849723TEL
Last Edit Date/Time:	08/10/2011 10:35:32

Reg#: [REDACTED] Name: KEENE, JENNIFER EVE DOB: [REDACTED] Sex: F Age: 42 Years User Name: DONNAMAR

Document Type: LET/NOTE-RV

Case Date: 08/05/2011

Electronically signed documents are the authoritative medical record copy. Unsigned documents are considered preliminary and may be modified. Documents dated prior to 2001 may be signed on paper.

Printed: 08/25/2011 11:29 AM

Re: Keene, Jennifer Eve
Reg No: [REDACTED]
DOB: [REDACTED]
Date of Service: 08/05/2011

This is from 8 to 9 a.m.

This is an outpatient individual psychotherapy medication management.

SUBJECTIVE: Patient was seen in followup, CareWeb notes reviewed.

OBJECTIVE: Patient came in, said that she was having trouble managing her thoughts at work. She gave an example last Friday of when a patient came in 2 hours late and how she handled that situation. She realizes that there were probably other ways that she could have handled it, but she felt overwhelmed and things take a lot longer for her to process and so there are ramifications of that decision she made re the patient. It is clear that the patient is not doing well. She is currently on Abilify, lithium, Celexa, trazodone, Ativan and her thoughts are not organized optimally and she does not feel well. We talked about ways to manage how she is doing and in the interim, it seems the most prudent thing would be to put her on medical leave for a week or 2 and see how she does. Besides the bipolar depressed diagnosis, she has probably postpartum depression as well as multiple stressors related to her husband and work. She just does not feel well and feel like herself and the medications have not kicked in yet to try to improve, but she is not suicidal or homicidal, she is not psychotic. She is quite depressed and her thoughts are not well organized.

ASSESSMENT AND PLAN:

1. I asked her to call WorkConnections and I filled out the forms for her.
2. She will go over to work today and let them know that she is going on medical leave.
3. I think it would be prudent for her to write a note about what happened last Friday so that it is clear there were medical complications related to what happened last Friday and will deal with major work issues then. Diagnoses are bipolar depressed as well as postpartum depression and I will see her on Tuesday, August 9 at 9:00 in the morning.

Michelle Riba, MD
Professor

//Electronically signed by Michelle Riba, MD/3614 on 08/08/2011 13:01:26//

Dictated by: Michelle Riba, MD/3614
Dictate Date/Time: 08/05/2011 10:28:54

Sent to EHR Date/Time:	08/06/2011 10:38:02
Import Source:	Stentel on eScription
Document ID:	001838947TEL
Last Edit Date/Time:	08/08/2011 13:01:26